



Dressage NSW Entry Form – Clarendon Event

Conducted by Dressage NSW Inc - ABN: 97 482 552 442

Upon payment this form will become a TAX INVOICE for GST purposes.

Please retain a copy for your records.

Event Date:			Horse's Name	Horse's EA No	Rider's Name	Rider's EA No	Entry Fee
Comp No	Bridle No	Grading Pts					
Microchip #:							\$
<i>Total Entry Fees, inc. GST</i>							
Stabling: DNSW accepts no responsibility for the condition or state of repair of the stables. Specify nights horses will be on the grounds: M T W T F S							N/A
* Camping: Cost \$12 per night. Specify nights camping be on the grounds: M T W T F S							\$
Admin Fee: Compulsory and non refundable							\$5.00
TOTAL FEES inc. GST							\$

* Failure to camp without booking and paying may result in entries not being accepted in the future.

Dressage NSW Events: If oversubscribed, I am happy to ride on grass arenas: YES/NO

Owner Name:		E.A. Number:	
Name for Draw:			
Address for Draw:			
Post Code:	Tel: ()	AH ()	BH
Email:	Mobile:	Fax:	

I would prefer to receive draw on email: Yes/No I am happy to download draw from DNSW web site: Yes/No
 I would like to receive a hard copy of the draw by mail: Yes/No

Other information as required by Organising Committee: eg. DOB; Junior/Young Rider/Senior Rider/Pony etc

I can help out OR can nominate a friend/relative as **Gear Steward** or **Pencilling, collect test papers, hospitality** or (please circle if you can assist in one of these areas) – Name of friend/relative _____ Tel: _____

Tick box if you have a current First Aid Certificate and would be happy to be on call in case of an emergency

Note: A **Release and Waiver of Liability** is no longer required for each event as it is covered with competitors **EA membership**.

RULES and REGULATIONS: I agree to abide by the conditions of entry and rules and regulations as set down for the conduct of a dressage event.

Name: Signature:

Date: Please make cheques payable to Dressage NSW

Send to: Clarendon Events, Dressage NSW Inc., **PO Box 975, RICHMOND, NSW, 2753**

Dressage NSW Events – Credit Card payments

Please charge my: Visa Master for \$..... Paying for DNSW entries on:

Card No: _____ Expiry Date: ____/____

Full Name on Card: Cardholder's signature: