



ENTRY FORM

This event is an ECAHO 'A' show and is affiliated with the European Arab Horse Show Commission.

Entries Open: 15th NOVEMBER 2011 Entries Close: 15th DECEMBER 2011 Entry Fee: SR 1000

Please complete all fields in **BLOCK LETTERS**.

HORSE NAME: _____

(Only one horse per form)

Owner: _____

Address: _____

Country: _____

Email: _____

Mobile : _____ **Tel.:** _____

Fax: _____

Breeder: _____ **Country:** _____

Show Handler: _____

By the closing date of entries the horse is registered in the studbook of: **Country:** _____

Reg. No.: _____ **Studbook/Association:** _____

Class	Name of the horse	Sire/Dam	Grand-Sire/-Dam
		S:	S:
			D:
		D:	S:
			D:
Sex	Date of Birth	Colour	
Conflict of Interest Notification			
Name of Judge:			

I, the undersigned owner, or owner's representative, engages that I, my trainer, handler & assistants, hold entire responsibility for the horse entered and I accept without restriction the statutes, regulations & jurisdiction of ECAHO. Furthermore, concerning my entry, I have declared any possible conflict of interest with the judges.

Copies of the horse passport, or Registration Certificate, incl. pedigree, markings & vaccinations are enclosed.

Name: _____ **Position:** _____

Signature _____ **Date:** _____

OFFICIAL USE ONLY			
Entry Accepted by (Name)	Payment Received	Signature	Date

