

THE SHOW HORSE COUNCIL OF AUSTRALASIA Inc.
 (ABN 51 590 953 920)
 Ph/Fax 02.4324 1006, P.O. Box 9015 Wyoming 2250
PITCHER PARTNERS
PACIFIC COAST HACK CHAMPIONSHIPS
 29th & 30th May 2010 at SIEC, Horsley Park

RIDER CLASSES

CLASS _____ **OPEN FEE \$30.00, OTHER \$15.00**

COMPETITORS NAME: _____

Attach copy of S.H.C. Membership Card or Receipt (Date of Birth if under 21yrs)

ADDRESS: _____

_____ **Phone** _____ **Email:** _____

Name of Mount: _____

(See Clause 22 if under 12yrs)

N.S.H. Reg.No. _____ (Attach Copy of Reg.Papers)

Entry in this Event shall constitute an agreement and affirmation from all participants (which shall include without limitation the Owner, Exhibitor, Responsible Officer, Lessee, Manager, Agent, Rider, Handler and the horse) for themselves.

1. Shall compete subject to and agree to be bound by the Show Horse Council Of Australasia Inc. Competition Rules, Regulations and Conditions Of Entry applicable to this Show.
2. By voluntarily participating in the Show will accept as Final any decision of the Show Horse Council of Australasia Inc. Committee in regard to any incident arising from or in connection with this Show.
3. Agree to indemnify the Show Horse Council of Australasia Inc. &/or Officials of this Show, harmless for any action taken in relation to the Show.

SIGNATURES BELOW AFFIRM

YOU HAVE READ, AGREE AND WILL COMPLY WITH THE ABOVE REQUIREMENTS OF ENTRY.

	Yes	No
1. Are you GST registered?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the ATO provided you with an ABN. (If "Yes" please supply ABN)	<input type="checkbox"/>	<input type="checkbox"/>
3. ABN: <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>		
4. Is your show equestrian activity a hobby?	<input type="checkbox"/>	<input type="checkbox"/>
5. Name: _____		
6. Address: _____ _____		
7. Signature: _____		
Date: / /		

SIGNATURE OF COMPETITOR:
X _____

(Parent or Guardian to sign too if under 18yrs)

SIGNATURE OF HORSE OWNER
X _____

PRINT NAME OF RESPONSIBLE OFFICER:
X _____

SIGNATURE OF RESPONSIBLE OFFICER
X _____