



WIDGEE MINIATURE HORSE AND PONY SHOW

SATURDAY 15th and SUNDAY 16th 2017
Widgee Showgrounds, Widgee, Queensland

ENTRY FORM

ENTRIES CLOSE: 7th July 2017

(Double entry fees for entries after this date).

HORSE REGISTRATION MUST ACCOMPANY THIS FORM
(unless previously supplied)

*Showing commences at 9.30am on Saturday and 8.00am on Sunday.
Yard bedding will be the responsibility of the exhibitor.
Yards are to be cleaned before departure or a fee will be incurred.
A 10% discount applies to nominations of 4 or more horses or ponies.*

HORSE and/or HANDLER NAME	REG No.	D.O.B.	CLASS NUMBERS																	

Name: _____ Member No: _____
 Address: _____ Post Code: _____
 Phone: _____ Mobile: _____ Email: _____
 Yarding: Date In: _____ Date Out: _____ No. of Days: _____
 No. of Yards per Day: _____ Bedding: *BYO*

CLASS NOMINATION FEES	Members	Non-Members
Led, Harness & Performance	\$8 / Class x _____ = \$ _____	\$10 / Class x _____ = \$ _____
Novelty	\$6 / Class x _____ = \$ _____	\$8 / Class x _____ = \$ _____
Youth	\$5 / Class x _____ = \$ _____	\$7 / Class x _____ = \$ _____
Costume	\$0 / Class x _____ = \$ FREE	\$0 / Class x _____ = \$ FREE
Yards	Free _____ = \$ _____	Free _____ = \$ _____
Powered Site	\$10 / Night x _____ = \$ _____	\$10 / Night x _____ = \$ _____
Discount	10% _____ = \$ _____	10% _____ = \$ _____
TOTAL PAYABLE	\$ _____	\$ _____

Money Order / Cheque / Direct Deposit (please circle payment method)

Direct Deposit Details: BSB No:723000, ACCOUNT No: 100031399, ACCOUNT NAME: AMR – Australian Miniature Horse & Pony Registry (Heritage Isle Credit Union)

Ref: WIDGEE + YOUR SURNAME

A COPY OF THE DIRECT DEPOSIT RECEIPT MUST BE ATTACHED with SUBMISSION OF ENTRIES

Enquiries to Michael Bowden - phone - 0435 089 093 - email = michaelbowden2010@hotmail.com



I/we hereby certify that the above details are correct and in accordance with the Conditions of Entry, as set down by the Show Convenor, which I/we have read and agree to comply with. I/We hereby acknowledge and accept that I/we are responsible for any non-member who accompanies me/us. I/We hereby acknowledge that drug testing may take place at any AMR Event and that by participating I/we agree to any such testing if requested/required. Further, I/we and any persons accompanying me/us, agree to abide by the Constitution and Show Rules of the Australian Miniature Horse and Pony Registry. I/we acknowledge and have made those accompanying me/us aware that equine sports have the potential to be dangerous and accept that while every effort will be made with regard to safety, I/we and those persons accompanying me/us, will not hold the Australian Miniature Horse and Pony Registry responsible for any damage, loss or injury incurred.

Disclaimer of Liability: Neither the Organising Committee or the Australian Miniature Horse and Pony Registry accept any liability for any accidents, loss, damage, injury or illness to horses, owners, spectators or any other persons whatsoever. Exhibitors and handlers compete at their own risk.

Signature: _____
(If under 18, parent must sign.)

Date: _____

NAME: _____

ENTRIES MUST REACH THE ORGANISERS BY LAST POST ON TUESDAY, 24th March 2017.

ENTRIES TO:

Michael Bowden
P O Box 2275
Wandal
Qld 4700