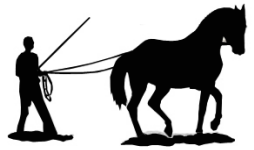


LONG-REINING UK Event Entry Form



Date of Competition: _____ LRUK Membership No. _____

Class	Competitor name	Age (under 18yrs)	Name of Horse	Height	Age	Breed	LRUK Bridle No.	Entry Fee £
TOTAL FEES								

COMPETITOR DETAILS

Please complete in BLOCK CAPITALS.

Mr/Mrs/Miss/Other: _____

First Name: _____

Surname: _____

Address: _____

Post Code: _____

Home Telephone: _____

Mobile: _____

Email: _____

ICE (emergency contact) _____

PARENT/GUARDIAN DETAILS

To be completed if Member is under 18.

Mr/Mrs/Miss/Other: _____

First Name: _____

Surname: _____

Address: _____

Post Code: _____

Home Telephone: _____

Mobile: _____

Email: _____

SPECIAL AWARDS

*only when advertised on schedule

- Young Handler
- Veteran Handler (60 yrs +)
- Young Horse (3,4 yrs)
- Veteran Horse (17yrs +)
- Traditional Cob
- Small/Miniature Pony

PAYMENT METHOD

BACS:

NatWest account no. 61164712.

Sort code: 60-21-55.

Please use your name as a reference for payment.

Cheque/PO made payable to:

"Long-Reining UK LTD"

POST THIS FORM TO:

LRUK, Secretary
 Miss Ann P. Bird,
 The Farriers Rest,
 85 The Street,
 North Lopham, Nr Diss,
 Norfolk IP22 2LR

DECLARATION

I agree to abide by the Rules governing this event.

I certify that I have third-party insurance that covers me and my horse when competing at this event for any loss or injury to myself or others. Insurance can be in the form of membership of the BHS, equestrian organisation or personal insurance policy.

Signed: _____

Parent/Guardian (under 18) _____

Date: _____

DATA PROTECTION STATEMENT

Long-ReiningUK retains the data provided by those entering this competition for the purpose of organising and running the event and planning of future events. By completing the entry form and entering the competition, the competitor understands and agrees that this data can be used for the publication of results of the competitions in the paper and electronic media, including photographs.