



CHAPS UK ENTRY FORM

Please send postal entries to:
relevant Show Secretary for
CHAPS UK Regional/Championship Show.

CASH PAYMENT ONLY for entries made on Show Day

User I.D. is ONLY required for HOYS Qualifiers

If you do not have a User I.D. just fill in ALL relevant details

If each User I.D. is listed then just the EXHIBITOR/OWNER/RIDER'S NAME, POSTCODE
& HORSE'S NAME NEED COMPLETING.

You will find your USER I.D. in your Online Grandstand Media Account.

User I.D. only is required for HOYS qualifiers - ONE FORM PER HORSE. Please write clearly in **black ink** using CAPITAL LETTERS

1	CLASS NUMBER (Inc. SECTION):	ENTRY FEE: £	FIRST AID £	TOTAL FEE TO PAY £
2	EXHIBITOR USER ID:	FULL NAME: Mr/Mrs/Miss	SOCIETY MEMBER OF & No:	
	ADDRESS:		POST CODE:	
	TELEPHONE:	MOBILE:	EMAIL:	
3	HORSE/PONY USED ID:	NAME:	PASSPORT No:	JMB No:
	COLOUR:	SEX:	HEIGHT:	AGE:
			BREED:	SOC REG No:
	SIRE:	DAM:	BREEDER NAME:	
4	OWNER USER ID:	FULL NAME: Mr/Mrs/Miss	SOCIETY MEMBER OF & No:	
	ADDRESS:		POST CODE:	
	TELEPHONE:	MOBILE:	EMAIL:	
5	RIDER USER ID:	FULL NAME: Mr/Mrs/Miss	SOCIETY MEMBER OF & No:	
	ADDRESS:		POST CODE:	
	TELEPHONE:	MOBILE:	EMAIL:	

*I HEREBY ACKNOWLEDGE that before making these entries I have carefully read the Rules and Regulations contained within this rule book of CHAPS UK and the Horse of the Year Show and that I make these entries in accordance with them. I agree in all respects to comply with and be bound by these Rules & Regulations. I understand that the organisers of CHAPS UK or the Horse of the Year Show have no liability to me for any accident, injury, damage, illness, disease or other loss occurring to my property and/or animals and shall only have liability to me for personal injury or death to the extent caused by or contributed to by their negligence. I understand that I shall be responsible to the Organising Team of CHAPS UK or the Horse of the Year Show, their principals and Grandstand Media Ltd for losses suffered by them to the extent that it arises from or is contributed to in any way by any act, neglect or omission by me or by any person for whom or of any animal for which I am responsible. I confirm I have in place adequate, sufficient third party insurance cover for the participation at a CHAPS Show or the Horse of the Year Show. I agree to my details being used in conjunction with any Horse of the Year Show Qualifier or the Final. I am also aware that I must comply with any additional rules or regulations as enforced by the Show hosting the qualifier. I understand that my details will be stored on the Grandstand Entries System.

PRINT NAME: *SIGNED: DATE: