

# Dressage competition Entry Form

Aspley Guise & District  
Riding Club



Membership no (if applicable) \_\_\_\_\_ Senior \_\_\_\_\_ Junior \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Class	Section	Test	Horse	Sen/Jun	Rider	Fee

<b>I agree to abide by the rules in the schedule</b>  Signature: ..... ...				
	<b>TOTAL</b>			

Please check you have written clearly, entered correct classes/sections and make cheque payable to AG&DRC.  
 Entries to: Check show date for which secretary to send to.

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