

# SIDE SADDLE ASSOCIATION AREA 14 SUMMER SHOW

SUNDAY 13<sup>TH</sup> JULY 2014

CLASS (ES)	RIDER'S NAME	YEAR OF BIRTH(JUNIOR)	HORSES NAME	AGE OF HORSE	MEMBERSHIP NO & AREA (SSA)	ENTRY FEE`
					TOTAL	

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

I agree to abide by the terms and conditions of entry, and by the rules as stated in the schedule

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE RETURN ENTRY FORM COMPLETE WITH FULL FEES TO; Emma Harford, Talland School of Equitation, Dairy Farm Ampney Knowle, Glos, GL7 5ED. Cheques payable to SSA Area 14.