

Charleville Show

ENTRIES FOR HORSE AND PONY CLASSES ONLY

www.charlevilleshow.com • info@charlevilleshow.com

IMPORTANT NOTICE: Please remember to include the Registration Number of animal

Please indicate if you are willing to download the Schedule for next year instead of receiving it by post

Yes No

Don't forget to include your email address below.

Class Number	Name of Animal	Registration Number	Age	Colour	Please tick (✓) appropriate box				Sire	Dam	Name of Breeder	Entry Fee
					Colt	<input type="checkbox"/>	Filly	<input type="checkbox"/>				
					Gelding	<input type="checkbox"/>	Mare	<input type="checkbox"/>				
					Colt	<input type="checkbox"/>	Filly	<input type="checkbox"/>				
					Gelding	<input type="checkbox"/>	Mare	<input type="checkbox"/>				
					Colt	<input type="checkbox"/>	Filly	<input type="checkbox"/>				
					Gelding	<input type="checkbox"/>	Mare	<input type="checkbox"/>				
					Colt	<input type="checkbox"/>	Filly	<input type="checkbox"/>				
					Gelding	<input type="checkbox"/>	Mare	<input type="checkbox"/>				
					Colt	<input type="checkbox"/>	Filly	<input type="checkbox"/>				
					Gelding	<input type="checkbox"/>	Mare	<input type="checkbox"/>				
					Colt	<input type="checkbox"/>	Filly	<input type="checkbox"/>				
					Gelding	<input type="checkbox"/>	Mare	<input type="checkbox"/>				
					Colt	<input type="checkbox"/>	Filly	<input type="checkbox"/>				
					Gelding	<input type="checkbox"/>	Mare	<input type="checkbox"/>				

BLOCK CAPITALS PLEASE

(For Office Use Only)

NAME: _____ PREMISES No. _____

ADDRESS: _____

Email _____ Tel: _____ Mobile: _____

I ACCEPT THE RULES OF THE SHOW AND WISH TO ENTER THE EXHIBIT(S), PARTICULARS OF WHICH I HAVE SET OUT ABOVE.

By entering you are agreeing to have these details published. If you object, please tick this box

SIGNED: _____ DATE: _____ TOTAL REMITTANCE: € _____

ATTENTION ALL ANIMAL OWNERS

-SHOWING ANIMALS

Do you have insurance for your animal(s)?

Yes No

Name of Insurance Co.
