

## *2013 YOUNGSTOCK of the year show – entry form*

**Entries Close 25<sup>th</sup> January 2013** - Entry forms must be accompanied by the correct fees and paperwork or they will be returned and a \$10 administration fee charged.

Entry Fees - \$12.00 per Class – **NO LATE ENTRIES WILL BE ACCEPTED**

Please forward entries to; RPSBS - WA Branch, Show Secretary, 31 Landers Road,  
Lesmurdie WA 6076



Cheques & Money Orders to be made payable to: **Riding Pony Stud Book Society WA**

Direct Deposit Available: "RPSBS (WA Branch), BSB – 633 000, Account Number – 1332219279

**PLEASE USE YOUR NAME AS THE REFERENCE** (NOTE – payment must show in the RPSBS WA bank account within 48 hours of close of entries, if not, your entry will be returned to you. Please attach a copy of your EFT deposit receipt to your entry form.

**NOTE – Copy of registration papers, membership card and height certificates must submitted at the time of entry (refer to points 9 & 10 on page 2 of the programme which refers to height certificates)**

### **PLEASE NOTE INCORRECT ENTRIES WILL BE RETURNED AND A \$10 ADMINISTRATION CHARGED**

CLASS NO	HORSES NAME	HANDLER/RIDERS NAME	HORSE REGO NUMBER	ENTRY FEE
		<b>SUB TOTAL</b>		
<b>STABLING IS TO BE BOOKED THROUGH THE STATE EQUESTRIAN CENTRE PHONE 9296 1200 or <a href="http://www.secbrigadoon.com">www.secbrigadoon.com</a></b>		<b>HANDLER/RIDER FEE -\$22</b> (applicable to handler/riders showing who are not members of the RPSBS)		
		<b>GROUND FEE \$15 PER HORSE</b> (applicable to each horse entered that is owned by a Non EWA Member)		
		<b>PROGRAMME</b>		<b>\$2.00</b>
		<b>DONATIONS</b>		
		<b>TOTAL</b>		

EXHIBITORS NAME:	EXHIBITORS RPSBS MEMBERSHIP NUMBER:
HANDLERS RPSBS MEMBERSHIP NUMBER:	
RECEIPT NUMBER IF PAID BY DIRECT DEPOSIT:	
ADDRESS:	
EWA MEMBERSHIP NUMBER (if applicable):	
EMAIL (required for acknowledgement of receipt of pre- entry) :	
CONTACT NUMBER:	

I declare I have read, understand and agree to abide by the rules and regulations as detailed in the Show Program.  
SIGNED (If under 18 Parent or Guardian to Sign)

Date \_\_\_\_\_