



Equestrian Ireland Interschools Entry Form



Please complete this form in Block Capitals

Venue : GALWAY EQUESTRIAN CENTRE

Host: ___ GALWAY EQUESTRIAN CENTRE

Date: ___ SATURDAY 30TH MARCH

School: _____

Team Name:

Novice: Open: Primary:

NB: All competitors must be currently in FULL TIME Education at the School.

Team	Competitor's Name	D.O.B	Horse /Pony Name	Grade	EII No
1					
2					
3					
4					
Chef d'Equip					
Mobile/Contact					

NB: Competitors run under Interschools League rules. Only 1 grade A pony per team. All riders must become members of EII

I hereby confirm that all the above named students are currently in full time secondary education.

Name of School Principal or Representative:	School Stamp
Signature of School Principal or Representative:	
Email:	