



WEXFORD EQUESTRIAN

INTER SCHOOLS SHOWJUMPING COMPETITION - ENTRY FORM
open or novice teams secondary

Please complete in BLOCK LETTERS

NAME OF SCHOOL _____ TEAM COLOUR/NAME _____

STATE IF TEAM IS **NOVICE** 80cm OR **OPEN** 1M _____

Competitors Name (in order of jumping)	Date of Birth <u>DD/MM/YY</u>	Name of Horse		EEI Number here
1.				
2.				
3.				
4.				
Chef d'Equipe/contact : Email address : Tel Contact : (All must be given for start lists to be given out)				

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

Name of School Principal _____ School Stamp:

Signature of School Principal _____

Please return entry form with cheque €80 team **TOTAL ENC** _____

Ind competitions for 80.90.1m & 1.10m entry on the day

Chq made payable to 'Wexford Equestrian send to: Wexford Equestrian ,
Riverfalls,Ballygullick, Tomhaggard, Co Wexford EMAIL

info@wexfordequestrian.ie ENQUIRIES **086 3902309**

See website for details www.wexfordequestrian.ie