2018 ActewAGL Royal Canberra Show HORSE SECTION OFFICIAL ENTRY FORM ENTRIES CLOSE 31st OCTOBER 2017



### HOW TO ENTER

- Please ensure all details are printed clearly and correctly!
- Return entry forms to:
  - O RNCAS Horse Section, PO BOX 124, Mitchell ACT 2911 OR
  - o Email to horsesection@rncas.org.au
- Faxed Entry Forms WILL NOT be accepted.

### EXHIBITOR DETAILS

EXHIBITOR NAME(S): Please list the exhibitor name exactly how you would like it to appear in the c	
CONTACT NAME :	
POSTAL ADDRESS:	
STATE:	POSTCODE:
CONTACT NUMBER:	
EMAIL ADDRESS:	
RNCAS MEMBERSHIP	
PLEASE ADVISE IF YOU HAVE A FULL MEMBERSHIP WITH RNCAS	YES NO
MEMBERSHIP NAME:	MEMBERSHIP NUMBER:
PAYMENT OF PRIZEMONEY	
ACCOUNT NAME:	BANK NAME:
BSB:SSSSSSSSS ACCOUNT NUMBER:	
CONDITIONS OF ENTRY	
<ul> <li>I agree to comply with and be bound by the Regulations and By-Laws of the RN</li> <li>I certify that 5@@details on this entry form are true and correct</li> <li>I certify the horse entered has not been exposed to any notifiable disease/s to</li> </ul>	
SIGNATURE: DATE:	
(PRINT NAME (Parent/Guardian):	Parent/Guardian must sign if exhibitor is under 18)
PAYMENT DETAILS	
METHOD OF PAYMENT: CASH CHEQUE MONEY ORDER	CREDIT/DEBIT CARD
TYPE OF CARD: VISA MASTERCARD AMEX/DINE	ERS (3.5% fee applies)
NAME ON CARD:	SIGNATURE:
CARD NUMBER:	EXPIRY DATE:

### EXHIBIT DETAILS - A SEPERATE FORM MUST BE USED FOR EACH INDIVIDUAL HORSE

EXHIBIT	NAME:

HEIGHT: \_\_\_\_\_\_ FOALED: \_\_\_\_\_\_ SEX: \_\_\_\_\_

### FULL NAME OF COMPETITOR (if entering rider's class): \_\_\_\_\_

### CLASS ENTRIES

	CLASS NUMBER	CLASS DESCRIPTION	ENTRY FEE
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
		SUBTOTAL	

SUBTRACT 20% MEMBER DISCOUNT

TOTAL

### HORSE REGISTRATION DETAILS

REGISTRATION NUMBER	NAME OF SOCIETY/ASSOCIATION

MICROCHIP NUMBER: \_\_\_\_\_

### PERFORMANCES

	CLASS DESCRIPTION	NAME OF SHOW	PLACING GAINED
1.			
2.			
3.			
4.			
5.			
6.			

# 2018 ActewAGL Royal Canberra Show

# **Horse Section - Stabling Request**

Closing date: 31 October 2017



## Stabling Request Instructions and Conditions

- 1. Stabling is limited and not all exhibitors will be offered stabling. Acceptance of entries does not guarantee stabling.
- 2. An alternative is to use off-grounds stabling. Use the White Pages and search in ACT.
- 3. Stabling allocations are the responsibility of the Stabling Committee and all decisions are final.
- Do not send money for stabling at the time of entry. If stabling is allocated an invoice will be sent with acceptances. 4. Stable invoices must be paid by the due date. Failure to pay will result in automatic cancellation of stables for the 2018 Show this will be strictly enforced.
- 5. Bedding must be provided by the exhibitor.
- Horses that are not allocated a stable at the time of acceptances will automatically go on a stable wait list. 6.
- Unless an official Withdrawal notice is received all horses will be assumed to be attending and will remain on wait lists. 7. An exhibitor who is allocated stabling and does not attend and does not withdraw in writing will be responsible for all stabling costs as booked.
- Stable check-in time: 6 pm on the day of arrival. Check-out time: 5 pm on the day of departure. Stable fees are charged 8. for each night the stable is booked.
- 9. Stables are allocated to specific horses and are not transferrable. Stables may be used only for housing horses.
- 10. Horses may not occupy stables prior to the check-in time without the permission of the stable staff.
- 11. All horses must exit by the check-out time and stables must be left clean ready for the next occupant.
- 12. Stabling fees for the 2018 ActewAGL Royal Canberra Show are as follows (all prices include GST):

Stall type	Fee per night
Loose Box (LB) fully enclosed with a roof	\$40
Covered Stall (CS) Pipe yard with a roof	\$30
Open Yard (OY) Pipe yard (3 sides only) without any roof	\$10

#### Declaration:

I acknowledge that I have read all stabling rules and regulations in the Schedule and the conditions contained on this form and I agree that I accept all terms and conditions and will abide by them.

Name: \_\_\_\_\_\_ Signed: \_\_\_\_\_\_

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

HORSE DETAILS AND STABLING REQUESTS: If you will only take one (1) particular type of horse accommodation select only a 1st preference. Select a 1st & 2nd preference in case you don't get your first choice but there is a second type you will accept. If you will take any accommodation for your horse(s), select only the last option 'No preference will take any'.

HORSE NAME										
HORSE DETAILS	Sex		Height		Day arrive			Day leave		
STALL TYPE (please circle)	Prefe	erence 1: LB / CS	/ 0Y	Preference	2: LE	B/CS/OY	OR: I	No pref	erence wi	ll take any
HORSE NAME										
	Sex		Height		Day			Day leave		

### Notes/Requests: \_\_\_\_

### HORSE DETAILS AND STABLING REQUESTS continued:

If you have more than 10 horses please copy this page of the form and attach with all details completed.

HORSE NAME				
HORSE DETAILS	Sex	Height	Day arrive	Day leave
STALL TYPE (please circle)	Preference 1: LB / CS	6 / OY Preferen	ce 2: LB / CS / OY	OR: No preference will take any
HORSE NAME				
HORSE DETAILS	Sex	Height	Day arrive	Day leave
STALL TYPE (please circle)	Preference 1: LB / CS	6 / OY Preferen	ce 2: LB / CS / OY	OR: No preference will take any
HORSE NAME				
HORSE DETAILS	Sex	Height	Day arrive	Day leave
STALL TYPE (please circle)	Preference 1: LB / CS	S / OY Preferen	ice 2: LB / CS / OY	OR: No preference will take any
HORSE NAME				
HORSE DETAILS	Sex	Height	Day arrive	Day leave
STALL TYPE (please circle)	Preference 1: LB / C	S/OY Preferen	ce 2: LB / CS / OY	OR: No preference will take any
HORSE NAME				
HORSE DETAILS	Sex	Height	Day arrive	Day leave
STALL TYPE (please circle)	Preference 1: LB / C	S / OY Preferer	nce 2: LB / CS / OY	OR: No preference will take any
HORSE NAME				
HORSE DETAILS	Sex	Height	Day arrive	Day leave
STALL TYPE (please circle)	Preference 1: LB / C	S / OY Preferen	ce 2: LB / CS / OY	OR: No preference will take any
HORSE NAME				
HORSE DETAILS	Sex	Height	Day arrive	Day leave
STALL TYPE (please circle)	Preference 1: LB / C	S / OY Preferer	-	OR: No preference will take any
HORSE NAME				
HORSE DETAILS	Sex	Height	Day arrive	Day leave
STALL TYPE (please circle)	Preference 1: LB / C	S/OY Preferen	•	OR: No preference will take any

Use this page if applying for stabling for more than 2 horses. Make sure all details on page 1 are also filled in.