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| |  |  | | --- | --- | |  |  | | **Cheques Payable to**  **NSJC**  Bank sort code: 30-96-17  Account Number: 77365368 |

**Non BS members may purchase a day ticket for £6 to be eligible to enter a class.**

***All competitors must be members of the Norfolk Show Jumping Club to be eligible for Trophies*.**

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| **Class** | **Horse/Pony** | **BS No.** | **Owner** | **Rider** | **BS No.** | **Fee** |
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| Address:…………………………………………………………………………  ..…………………………………………………………………………………  Telephone: ………………………email: ……………….……………………… | | | | **NSJC Membership if required:**  **£8.00 per rider or £12 per family** | |  |
| **First Aid: £2 per rider per day**  **£5 for the duration** | |  |
| **Total** | |  |

I acknowledge that I am taking part in a risk sport. I am a competent rider at the level of competition I am entering. I certify that each and all particulars above are correct to the best of my knowledge and that horses and persons adhere to the rules of the British Show Jumping Association and Houghton International Horse Trials/Norfolk Show

Jumping Club, Signed…………………………………………………….. **Stabled on site ? YES / NO**