

SHOW DATE _____

SHOW NUMBER

Class Nos. (Enter a maximum of 7 classes on this form – 1 class per box)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Full Name of Rider/Handler _____

Address _____

Name of Horse (**please state if colt or stallion**) _____

Age or Breed of Horse if relevant to a class _____

Membership Number (or NLG Club Name) _____

No. of Classes	@ £	£
No. of Classes	@ £	£
First Aid (paid on riders first entry only)	£4	£
TOTAL		£

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