NON_MEMBER MIDLANDS CARRIAGEDRIVING

ENTRY FORM

<u>VENUE</u> :	DATE:
DRIVER: Mr/Mrs/Miss	[firstname][surname]
ANIMALS NAME(S) Horse/Pon	y* delete as necessary
CLASS ENTERED: please state	which
I agree to abide by the rules under whi organisers with respect to any appeal or myself and all persons accompanying me with the organisation of the Event nor any in respect of death or personal injury cau in law responsible, accepts any liability	ch the Event is being held and to accept any decisions of the protest that may be referred to them. I also accept on behalf of e, that neither the MC nor the landowners nor anyone connected agent, employee, representative of member of any of them, save sed by negligence of the organisers or anyone for whom they are for any accident, loss damage, injury, or illness to any horse or, breach of statutory duty or in any other way whatsoever.
I CONFIRM THAT MY HORSE DATE VACCINATION FOR FI	E[S] / PONY[IES] HAVE AN UP TO LU & TETANUS
I CONFIRM THAT I HAVE IN	SURANCE WITH 'BC or 'BHS'
Please state name of club if mem	ber of BC Affiliated Club
By entering this competition I acce	ept that my results will be published
SignedAddress:	Date
7 =	ing on a competing carriage is/are under 18 years, h and obtain parents/guardians signature for all.
NameDa Parent /Guardian signature	ate of birth

Please send to: Mrs L West, Jodders, Soudley, Market Drayton, Shropshire, TF9 2SB Enclose: Entry fee payable to MC & a email address or self addressed envelope for times etc. £20 surcharge for entries received after closing date

IT IS COMPULSORY THAT YOU CARRY A FIRE EXTINGUISHER