

Scottish

# Indoor Horse Driving Trials

# ENTRY FORM

Please use block capitals.

Office use only

EVENT LOCATION \_\_\_\_\_ DATE \_\_\_\_\_

CLASS ENTERED (please tick one)  
Novice Pony  Open Pony  Multiple   
Novice Horse  Open Horse  Junior

DRIVER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

TICK IF JUNIOR  Date of birth (if under 18) \_\_\_\_\_

MEMBERSHIP I am a member of:  SCDA  BHDTA  BDS  IHDT (UK)

If you are NOT a member of one of the above, please give details here:  
MEMBER OF \_\_\_\_\_ HARNESS/DRIVING CLUB  
INSURANCE COMPANY \_\_\_\_\_  
POLICY NUMBER \_\_\_\_\_ EXPIRY DATE \_\_\_\_\_

Name of Horse or Pony	Breed	Age	Sex	Height
Carriage details:				
Please add any further information that could be used by the commentator at this or subsequent events.				

*I agree to abide by the rules governing this competition. I have read and understand the Health & Safety statement and accept the Disclaimer of Liability.*

**I enclose the entry fee of £ \_\_\_\_\_**

Signed \_\_\_\_\_ Date \_\_\_\_\_

If a JUNIOR, to be countersigned by a parent/guardian \_\_\_\_\_

**THIS FORM, TOGETHER WITH THE ENTRY FEE, MUST REACH THE EVENT ORGANISER 10 DAYS BEFORE THE EVENT.**

**No acknowledgment will be sent unless an SAE is enclosed.**