

2nd ARABIAN HORSE EVENT
24&25 GIUGNO 2017 MANERBIO ITALY
 CLOSE OF ENTRIES 10/06/2017



This show is affiliated with the European Arab Horse Show Commission Affiliation No. 057-2017-ITY

ENTRY-FORM (only one horse per form) info@tuttoshow.it

Owner: _____ **Country:** _____

Address: _____

Tel.: _____ **E-mail:** _____

Breeder: _____ **Country:** _____

By the closing date of entries, the horse is registered in the studbook of:		Country:	Studbook / Association	Reg. No.
Name of the horse:		Sire:	S D	I, the undersigned person, engage that I and my employees and assistants hold entire responsibility for the horse entered and I accept without restriction the statutes, regulations and jurisdiction of ECAHO. Furthermore, concerning the horse entered, I agree to declare any actual and/or apparent conflict of interest of myself and/or my employees and/or assistants with the judges. O There is an actual and/or apparent conflict of interest with judge: _____ O There is no conflict of interest with any judge
Date of birth: please complete all/...../.....		Dam:	S D	
Sex: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	Colour: <input type="checkbox"/> GREY <input type="checkbox"/> CHESTNUT <input type="checkbox"/> BAY <input type="checkbox"/> BLACK			
Photocopies of the presently valid registration documents are enclosed. This entry form is not valid without signature and the full contact details of the person who signs it N.b. PLEASE INCLUDE THE COPY OF THE HORSE PASSAPORT				Name of the person who signs the form: _____
Capacity in which you sign (owner, trainer, assistant, other – please state) : Date & Signature: _____				Address (incl. country): _____ Tel. _____ E-mail: _____

Effective as of 1st Jan. 2014. This form is available at www.ecaho.org (Download).
 FOR ANY INFO PLEASE CONTACT DR.SSA LAURA MASCAGNA info@tuttoshow.it mobile or whasapp +39/349/5629639