

CPCHC Entry Form

SHOW VENUE: _____

DATES: _____

Name: _____


Email: _____

Address: _____

Payout Details Account name: _____

of nominated persons Account number: _____

Class	Horse	Rider	Saturday Start 11am		Sunday Start 10am	
			Entry	Total	Entry	Total
Open Horse						
Novice Horse						
Open Non Pro						
U1500						
Rookie						
Restricted						
Youth						
Snaffle Bit Rider						
Snaffle Bit Horse						
Open Snaffle Bit						
CLUB SNAFFLE						
SUPERSTAKES						

 CENTRAL PLATEAU Cutting Horse Club	Saturday Total		Sunday Total	
	Total fees payable			

Waiver: I acknowledge that during all times while attending CPCHC and affiliated activities that I do so at my own risk and that I and other people in my care and control will not hold the CPCHC or any of its employees or agents liable for any personal injury or breach of contract whether caused by the negligence of the CPCHC, its employees or agents howsoever caused or otherwise. I acknowledge that in the event that I or any of the other people in my care and control find either or any of them in difficulty that I am to stop the activity, or request that the activity be stopped if appropriate and seek help and/or assistance and advice. By signing this form I understand that I and my dependants waive our rights to sue the CPCHC for losses relating to my and or my dependents personal injury or death that result from any negligence caused by the CPCHC. The Privacy Act 1993 and the CPCHC Policy is to accept that members have consented to the collection of details for the purpose of a membership and registration record, and for it to retain, use and disclose these to CPCHC areas and any other person or organisation as required. This consent is given in accordance with Privacy Act 1993, unless withdrawn in writing.

Post entry form to: J Gregory, 331Oruanui Rd, RD4, Taupo 3384 or email to: juliesteve7@gmail.com

persons under the age of 18 must have form signed by a parent or guardian

Payments can be made by cheque to: CPCHC

Or by internet transfer to: CPCHC - 02-0464-0245233-00 Signature: _____

