## Cavan Equestrian Centre Interschool Showjumping Saturday 28<sup>th</sup> November 2015



## Team Entries Close – Friday 20<sup>th</sup> November 2015

NAME OF SCHOOL:		
TEAM NAME/NUMBER:		
STATE IF TEAM IS NOVICE: (Please note: All competitors must be	OR OPEN:	y Education at the School)
Rider	Horse/Pony	Grade of Horse/Pony
(Order of Jumping)		
1.		
2.		
3.		
4.		
ENTRY FEE: €80 PER TEAM Chef d'Equipe – Name:	Conta	ect No:
Email:		
(NOTE: The Chef d'Equipe is responsible f the team on arrival and sign the SJI Insura		•
hereby confirm that all the above na	med students are currenty in full	time secondary eductation.
School Principal Name:		SCHOOL STAMP
Signature of School Principal:		
RETURN COMPLETED ENTRY FORM – V	WITH FULL PAYMENT	
CAVAN EQUESTRIAN CENTRE, LATT, CA	AVAN, CO. CAVAN.	
Entries Close – Friday 20 <sup>th</sup> November 2	2015	