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| Logo Arabia Polska.jpg |  ARABIA - POLSKA IV Warsaw ChampionshipECAHO INTERNATIONAL B-International ShowGóra Kalwaria, Buksza Polo & Riding Club, June 27-38th, 2015.Closing date for entries: 10th of June 2015 |  |

 **ENTRY FORM** (only one horse per form)



ECAHO affiliation

061/2015/pl

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| --- | --- | --- | --- | --- |
| **Owner:** | .................................................................................................................... | **Country:** | **y.**............................... |  |
| Address: | ................................................................................................................................................................. |
| **e-mail:** | ................................. | **Tel./Fax:** | ............................................................ |  |  |
| **Breeder:** | .................................................................................................................... | **Countryj:** | **y**................................ |  |

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| --- | --- | --- | --- |
|  By the closing date of entries, the horse is registered in the Studbook of | Country:  | Studbook:  | Passport no.: |
| Class: | Name oft the horse: | Sire: | Sire: | I, the undersigned exhibitor, engage that I and my servants and assistants hold entire responsibility for the horse entered and I accept without restriction the statutes, regulations and jurisdiction of ECAHO. Furthermore, concerning my entry, I agree to declare any possible conflict of interest with the judges. |
| Dam: |
| Date of birth: | Dam: | Sire: |
| Sex: | Colour: | Dam: |
| **Photocopies of the presently valid registration documents are enclosed.** | **Name of the exhibitor:** |
| …...................................................................... |
| This Entry Form is not valid without signatureClosing date for entries : 10th of June, 2015 . Cancellations after that date will be charged !! | **Date & Signature of the exhibitor:** |
| …...................................................................... |

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| Please mail the Entry Form to the Show Office: MZ BUKSZA**.: ul. Lipowa 5, 05-530 Obręb, Poland,** or send by email to: **buksza@icloud.com****Information: Paweł Olbrych mobile: +48.601.332584****All payments to Majatek Ziemski Buksza Paweł Olbrych, Lipowa 5 , 05-530 Obręb Rachunek nr** **59 1240 6247 1111 0000 4976 8662**Bank PEKAO SA |  |