

SRC ENTRY FORM		COMPETITION & DATE			
CLASS	RIDER	AGE IF UNDER 18 on JAN 1	HORSE	SRC NUMBER LAST 3 DIGITS	ENTRY FEE

Please state competition and date on envelope For X-country complete commentator info on reverse **TOTAL**

Please make cheque payable to SEVENOAKS RIDING CLUB

NAME .....  
 ADDRESS .....  
 TEL No. .... Email .....

Emergency Contact Tel. No. .... Name ..... For competitors coming to a competition alone

If you do not wish you or your child to be photographed at this event, please tick box.  Photographs may be sent to local papers & Riding Magazines or used on our website  
 I agree to abide by the Rules stated in the Omnibus Schedule. Signed: .....

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