

MOUNTED GAMES NOMINATION FORM

ZONE:			
Zone Manager:			
Phone Number:			
Team:		Age Group:	
	Rider Name	Horses Name	PCAQ M'ship No
1.			
2.			
3.			
4.			
TEAM FEE			\$120
Team:		Age Group:	
	Rider Name	Horses Name	PCAQ M'ship No
1.			
2.			
3.			
4.			
TEAM FEE			\$120
Team:		Age Group:	
	Rider Name	Horses Name	PCAQ M'ship No
1.			
2.			
3.			
4.			
TEAM FEE			\$120
Team:		Age Group:	
	Rider Name	Horses Name	PCAQ M'ship No
1.			
2.			
3.			
4.			
TEAM FEE			\$120
Team:		Age Group:	
	Rider Name	Horses Name	PCAQ M'ship No
1.			
2.			
3.			
4.			
TEAM FEE			\$120

SPORTING NOMINATION FORM

ZONE:				
Zone Manager:				
Phone Number:				
Team:		Age Group:		
	Rider Name	Horses Name	PCAQ M'ship No	
1.				
2.				
3.				
4.				
TEAM FEE			\$120 / \$80	
Team:		Age Group:		
	Rider Name	Horses Name	PCAQ M'ship No	
1.				
2.				
3.				
4.				
TEAM FEE			\$120 / \$80	
Team:		Age Group:		
	Rider Name	Horses Name	PCAQ M'ship No	
1.				
2.				
3.				
4.				
TEAM FEE			\$120 / \$80	
Team:		Age Group:		
	Rider Name	Horses Name	PCAQ M'ship No	
1.				
2.				
3.				
4.				
TEAM FEE			\$120 / \$80	
Team:		Age Group:		
	Rider Name	Horses Name	PCAQ M'ship No	
1.				
2.				
3.				
4.				
TEAM FEE			\$120 / \$80	

Total number of Mounted Games Teams _____

Total number of Sporting Teams _____

Total Teams Payment Due \$ _____

Zone Secretary _____

Signature

Print Name

CAMPING & YARDING FORM

ZONE:			
Zone Manager:			
Phone Number:			
Family Name	Campsite \$10	Yard \$15	Total Fee
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

Total number of Campsites _____

Total number of Yards _____

Total Payment Due\$ _____

Zone Secretary _____

Signature

Print Name