

Tetrathlon Nomination Form

Entries Close: Monday 2nd of November.

Class #	Riders Name	Rider Age	Sex (M/F)	PCQ #	Horse's Name	Swim Distance	Run Distance	S/J Height	Camping (Yes/No)	Stabling (Yard only) (Yes/No)	Nomination \$20
											\$
Helper Name and Telephone Number:											
Helper Name and Telephone Number:											
Helper Name and Telephone Number:											
Helper Name and Telephone Number:											Total Fees:

No Helper, No Ride – One helper per family

Email nominations and copy of payment receipt to grants@crowstnestponyclub.org.au

BSB: 638-010 AC: 7284705 Ref: "Name" NOMS

CLUB CHALLENGE Nomination Form

\$10 per team

Entries close: Morning of event - MUST BE PRIOR to the first phase of competition. Pre-nominations appreciated.

Team Name:			
Club/s represented:			
Competitor Name:	Age:	Discipline:	2 nd Discipline: (if team has only 2 or 3 members)
Payment total:			

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Club/s represented:			
Competitor Name:	Age:	Discipline:	2 nd Discipline: (if team has only 2 or 3 members)
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