

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	No of Nights	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