Scariff Show Society **www.scariffshow.com** **Saturday 29 August 2015**

Premises No:
_____

Do you have Insurance for your Animals?
YES/NO
Insurance Company:
_____

Closing Date for Entries Tuesday 25 August 2015
Enquiries: 087 7210221 or admin@scariffshow.com

PLEASE PRINT IN BLOCK CAPITALS

ENTRY FORM FOR HORSE SHOWING & CONNEMARA CLASSES

Class No	Name of Exhibit or Description	Age	Sex	Colour	IHR/Reg No	Sire	Dam	Breeder's Name	Fee

ALL EXHIBITORS ARE REQUESTED TO HAVE THEIR OWN INSURANCE

ENTRY FEES MUST ACCOMPANY THIS ENTRY FORM & FAILURE TO DO THIS WILL INCUR A SURCHARGE OF €5 PER EXHIBIT OR CLASS ON SHOW DAY. Please return FORM & FEE to Scariff Show Society Scariff, Co Clare

Exhibitor's Name: _____ **Address:** _____
Contact No: _____ _____
Email Address: _____ _____

I AGREE TO CONFORM TO THE RULES OF SCARIFF SHOW & TO ABIDE BY ITS DECISIONS.
SIGNED: _____ **DATE:** _____