



TEAM REGISTRATION FORM

2024 League

TEAM NAME:

SCHOOL NAME :

SCHOOL ADDRESS:

.....

.....

TELEPHONE:

EMAIL:

DATE.....

TEAM MEMBER AND HORSE / PONY'S NAME

1ST RIDER

2ND RIDER

3RD RIDER

4TH RIDER.....

*ALL RIDERS MUST HAVE INDIVIDUAL APPLICATIONS ACCOMPANIED

BY REGISTERING A TEAM YOU ARE GIVING PERMISSION FOR THE NAMES OF THE PUPILS TO BE INCLUDED IN THE PUBLISHED RESULTS OF THE COMPETITION.

PLEASE TICK THE HEIGHTS THIS TEAM WILL BE ENTERING:

30/40cm..... 50cm..... 60cm 70cm 80cm 90cm
1 m.....

TEAM MANAGER'S DETAILS (MUST BE OVER 18 YEARS OF AGE)

NAME

ADDRESS

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TELEPHONE

E-MAIL

All documents and information will be available from coxleigh.com or our Facebook group / page.

Should a journalist wish to speak to you for reporting purposes are you happy for us to release your details/and or pictures Yes No

Please tick here if you do not wish to hear from our Sponsors, Business Partners or selected third parties who may at times wish to provide you with information about goods or services which may be of interest to you.

REGISTRATION FORMS MUST BE RETURNED VIA POST TO Mrs J Gay, Coxleigh Barton, Shirwell, Barnstaple, EX41 4 JL OR VIA EMAIL TO schools@coxleigh.com A REGISTRATION FEE OF £10 PER HORSE AND RIDER COMBINATION IS REQUIRED. This, along with your entries MUST be paid via horsemonkey.com