

The Equestrian Federation of Australia
Victoria Branch Incorporated

ABN: 80 362 146 367



DWTS Young Horse Training, Judging & Coaching Clinic

Werribee Park National Equestrian Centre

Sunday 13th April 2008

**** Spectator Application ****

Name:	
Address:	
Membership Number:	Mobile:
Email:	Phone:
AH Number:	BH Number:

THIS BECOMES A TAX INVOICE UPON PAYMENT – please copy for your records

Spectator Payment:

I enclose *cheque/ money order* made out to **EFA VIC** or charge my: *VISA / MASTERCARD* for \$ _____

Card Holders Name: _____ Signature _____

Card Number: _____ / _____ / _____ / _____ Expiry Date: ____ / ____

Post or Fax spectator forms with payment by Friday 28th March 2008 to the address below

Code: 4-9400/50

****Demonstration Rider/Horse Expression of Interest****

Rider Name:	
Address:	
Membership Number:	Mobile:
Email:	Phone:
AH Number:	BH Number:

Name of Horse to be nominated:	
EFA Number:	
Horse's Age:	
Relevant information on the nominated horse (competition history, performances, schooling):	

Demonstration rider/horse expressions of interest to be submitted by Wednesday 26th March 2008

Contact: Caroline (Clinic Coordinator) carolinecoleby@bigpond.com (03) 9782 2416
Clare (EFAVic Dressage Coordinator) dressage@efavic.com.au (03) 9974 0511

Return Form to:

Postal Address: PO Box 616, Werribee, VIC 3030

Ph: 03 9974 0511 Fax: 03 9974 0577

www.efavic.com.au