

**ABCRA CAMPDRAFT ENTRY FORM**  
**COMPETITORS – MAKE COPIES AND USE FOR YOUR ENTRIES**  
**ONE FORM PER RIDER**



**EVENT NAME:** \_\_\_\_\_

**EVENT DATE:** \_\_\_\_\_

**COMPETITOR DETAILS (Please Print)**

**NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**TOWN:** \_\_\_\_\_ **PC:** \_\_\_\_\_

**P.I.C Number:** \_\_\_\_\_

**ABCRA MEMBERSHIP NUMBER:** \_\_\_\_\_

**A.B.N:** \_\_\_\_\_ **GST REG'D: YES**  **NO**

***NOTE: If ABCRA membership not financial or no membership number is supplied above a day permit will be charged on the day.***

**SIGNATURE:** \_\_\_\_\_

<b>RIDER</b>	<b>ORDER OF RUN (E.G. 1,2)</b>	<b>ABCRA HORSE REGO NO</b>	<b>HORSE NAME</b>	<b>MAID</b>	<b>NOV</b>	<b>OPEN</b>	<b>LAD</b>	<b>JNR</b>	<b>JUV</b>	<b>ENC</b>			<b>ENTRY FEE</b>
<b>TOTAL ENTRY</b>													