



CAMPDRAFT ENTRY FORM



Venue: AELEC, TAMWORTH Date: 14th, 15th & 16th April 2010 ACA Approved

Entries close 19th March 2010 – Payment required with nomination

Post to: Q10 AQHA, PO Box 979, Tamworth 2340 or Fax to: (02) 6762 6422 with Credit Card Details

Riders Name	ACA No.	Horses Name	Open	Restr. Open	Novice	Ladies	Maiden	Juvenile	Casual M/ship	TOTAL

**You must be a member of the ACA to compete (Casual m/ship is available) ACA Casual Membership: \$25 Adults, Juvenile \$8
If horses are registered with AQHA and owner is a financial member of the AQHA please supply AQHA registration numbers and membership numbers.**

Contact Name:.....

Mobile Phone:.....

Email Address:.....

Payment by cheque made payable to AQHA or Credit Card:

Card No: _____/_____/_____/_____

Expiry date: ____/____ Name on Card:

Total amount to be charged: \$_____ I hereby authorise the AQHA to deduct this amount from my credit card. Signed