



CAMPDRAFT ENTRY FORM. ONE FORM PER RIDER.

ENTRIES OPEN 9AM MONDAY 28th JANUARY AND CLOSE WHEN ALL AVAILABLE CATTLE ARE ALLOCATED.

EVENT NAME: Q19 AQHA Nationals **EVENT DATE:** 13th April 2019

COMPETITOR DETAILS

NAME: _____ PHONE: _____

ADDRESS: _____ EMAIL: _____

TOWN: _____ PC: _____ HOME P.I.C Number: _____

GST REGISTERED: YES NO PLEASE CIRCLE. ABN # _____

ABCRA MEMBERSHIP NUMBER: _____ NOTE: If ABCRA membership is un-financial or no membership number is supplied an event membership will be charged on the day.

AQHA MEMBERSHIP NUMBER: _____

I acknowledge that in submitting this entry, if I do not supply a valid membership number or horse registration number that neither I nor my horse will be eligible to receive any points that I may otherwise be eligible for.

SIGNATURE: _____ DATE: _____

Name of Horse	AQHA Rego #	Event	Cost

Payment Details:

Payment via Cheque, Direct Deposit or Credit Card.

Please make cheques payable to AQHA and post to AQHA, PO Box 979, Tamworth NSW 2340

Direct Deposit Details:

BSB: 032 621 | Acct No. 119369 | Ref: AQHA Membership No. or surname

Credit Card Details:

(1.77% fee applies to credit cards – if the transaction is rejected, due to insufficient funds, your payment will be considered as invalid and will not be processed)

Name on Card _____ MASTERCARD VISA BANKCARD ONLY

I hereby authorise the AQHA to deduct the following amount from my credit card \$_____

Card Number _____/_____/_____/_____

Expiry Date ____/____ Signature of card holder: _____