



INDOOR CARRIAGE DRIVING CHAMPIONSHIP

ENTRY FORM 2013 - 2014

(Block capitals please)

Entry for qualifiers of the British Indoor Carriage Driving Championship is open to ICD (UK) members ONLY

EVENT:

DATE :

Please state event and event date: CAPITAL PLEASE.

CLASS ENTERED _____ NOVICE [] OPEN [] please tick

DRIVERS NAME _____

ADDRESS _____

TEL: _____ Mobile: _____

Email: _____

If on 1st October 2013 you are UNDER the age of 18 or over the age of 60yrs please tick box []

BACKSTEPPER/GROOM NAME _____

ICD UK MEMBERSHIP No. _____ / _____

ALL competitors must be members of the ICD UK - No entry will be accepted unless number stated.

Horse/pony	Height	Vehicle details

PLEASE NOTE: Entries close ten days before event date but may close earlier depending on number of entries. Entering and signing this form for this qualifying event automatically gives ICD UK permission to publish any photograph taken whilst actually competing at this event regardless of age of competitor and groom/backstepper.

ENTRY FEE ENCLOSED £ _____

I agree to abide by the rules governing this Event and Championship.

SIGNED _____ DATE _____

If a Junior: SIGNED _____ Parent / Guardian.

PLEASE RETURN THIS ENTRY FORM AND ENTRY FEE TO
THE EVENT SECRETARY AS DETAILED IN THE SCHEDULE.