

<b>THE CHILWORTH RIDING CLUB HUNTER TRIAL</b>	<b>Sunday 19 September 2010</b>	<b>Entries to: The Secretary, Oakbank, 96 Rolleston Road, Holbury, Southampton, SO45 2GZ</b>
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CLASS	NAME OF RIDER& OWNER	NAME OF HORSE	HEIGHT	ENTRY FEE
St John's Ambulance (£2 per rider)    £				

Cheques to be made payable to Chilworth Riding Club **TOTAL: £**

It is the responsibility of the competitor to ensure they are familiar with the rules of the competition.

I agree to abide by the rules and conditions:

Signed ..... CRC Membership No: (if applicable).....

Address .....

.....Tel No: .....

Email Address .....

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