

N.P.H.A Celebration Show 2024

ENTRY FORM

Entry Fees

Halter, Amateur Halter	\$40 per class
Open Walk/Jog, Open Walk/Trot, Open Showmanship	\$50 per class (Jackpot Prize Money)
Open Perf. & Amateur Perf. (Incl. Showmanship)	\$60 per class (Jackpot Prize Money)
Feature Events	As per Listing
Youth WP & HUS Feature	\$60 per class (Jackpot Prize Money)
Youth	\$30 per class

ENTRIES CLOSE 26th of April 2024.

Please complete a separate entry for each horse and rider/handler combination

Horse Name.....Reg.No.....

Owner.....Breed M/Ship No.....

Rider/Handler.....Breed M/Ship No.....

Classes Entered

Horse Name.....Reg.No.....

Owner.....Breed M/Ship No.....

Rider/Handler.....Breed M/Ship No.....

Classes Entered

Horse Name.....Reg.No.....

Owner.....Breed M/Ship No.....

Rider/Handler.....Breed M/Ship No.....

Classes Entered

NAME.....

ADDRESS.....P/CODE.....

PHONE.....

EMAIL ADDRESS.....

PLEASE COMPLETE DETAILS OVER PAGE

MEMBERSHIP: If you are not a member of the NPHA or the AQHA then you are required to complete a Temporary Membership Form which is available on our web site. This also applies to anyone handling a horse including strappers that are not competing.
Please note that if you are an owner or a handler/rider in any NPHA Feature event you **MUST** be a financial member of the NPHA. This form is also available on the web.

Forms to be emailed to nphaentries@gmail.com (Closing Date 26.4.24)

Bank Account Details: Required for prize money payment:

BSB:.....A/C.....A/C Name.....

ENTRY TOTALS

Open/Amateur/Youth Feature Class Entries @ \$60 Each	\$
Open Walk/Jog, Open Walk/Trot and Open Showmanship, Reece Burchell Halter Memorial @\$50 Each	\$
Halter/Amateur Class Entries @ \$40 each	\$
Youth Entries @ \$30 each	\$
Feature Event Entries	\$
Office Fee @ \$20 Per Horse	\$
Processing Fee @ \$15 per horse	\$
Membership Fees-Include Signed Membership Forms (Including Temporary Membership @ \$15)	\$
Sponsorship	\$
TOTAL	\$

PAYMENT:

Direct Deposit – BSB 032278 A/C 403505 - Ensure your name is listed as the reference

Credit Card – Complete details below

CREDIT CARD PAYMENT AUTHORITY

Credit Card No:/...../...../..... Expiry Date:

Name of Card Holder:

Amount to be charged to the card above:

I hereby authorize the NPHA to deduct the above amount from my credit card :

Signature:

Note: Credit Card Fees will be added to each payment made via credit card.

ALL FORMS ARE AVAILABLE ON OUR WEBSITE www.npha.com.au

Please phone Joanne Gregory on 0437 703 353 if you have any queries