



SOUTH AFRICAN NATIONAL  
*Equestrian Federation*

SOUTH AFRICAN NATIONAL EQUESTRIAN FEDERATION

**NATIONAL OF INTENTION TO PARTICIPATE  
IN A  
NATIONAL TEAM CHAMPIONSHIP**

Regional Body
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Championship
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Dates	Closing Date of Entries
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AGE CLASSIFICATION

Adult	Junior	Child
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(Please place a tick in the appropriate box)

DISCIPLINE

Dressage
Driving
Equitation
Eventing
Showing
Showjumping
Vaulting

(Please place a tick in the appropriate box (es))

Signed -----Date-----

Regional Body Secretary

This form must be completed in duplicate. One copy must be faxed to the Federation And the other to the Secretary of the Organising Committee on or before the closing date of Entries for the Event.