

FOURWAYS RIDING CENTRE

1 Dassie Road, Timrand, AH Centurion West
E-mail: riding@global.co.za

Marion 0832758278 or Office 0832658278
Website: <http://www.4waysriding.co.za>



SUNDAY 16 March 2025

Fourways Equestrian
Club

DELICIOUS CATERING
AVAILABLE AT ROSIE'S
KITCHEN
BRAAI FACILITIES
AVAILABLE ON REQUEST



**TRAINING
SHOW
JUMPING**

POG TO 1.20M

VENUE

Fourways Riding Centre
No 1 Dassie Rd Timsrand

TIME

08h00

CLOSING DATE

Entries accepted on the day

Email a copy of deposit slip to riding@global.co.za.

First National Bank – Fourways Mall (25-16-55)

Account number: 56350022640

ENTRIES TO

Fourways Riding Centre, No 1 Dassie Rd Timsrand

riding@global.co.za Only during office hours **NOT** weekends)

DRESS

Riding hats are compulsory.

T-shirts with a sleeve allowed.

ENQUIRIES

Marion Clough 083 275 8278 or Office 083 265 8278 (Office hrs)

ENTRY FEE

R190 FEC members & R200 non-FEC members

INDEMNITY:

The show holding body reserves the right to alter the programme at their sole discretion. Neither Fourways Riding Centre, Fourways Equestrian Club nor their employees will be held responsible for any loss, damage, theft or injuries sustained by riders, horses/ponies or any member of the public whatsoever.

8:00AM START

<u>CLASS</u>	<u>TYPE OF CLASS</u>	<u>Height</u>
1	POLES ON THE GROUND CLEAR ROUND	POG
2	30CM CLEAR ROUND JUMP FOR JOY	30CM
3	40CM CLEAR ROUND JUMP FOR JOY	40CM
4	50CM WELCOME STAKES	50CM
5	60CM COMPETITION	60CM
6	70CM A2 SPEED COMPETITION	70CM
7	80CM COMPETITION	80CM
8	90CM ACCUMULATOR 8 FENCE WITH JOKER	90CM
9	1.00M COMPETITION	1.00M
10	1.10M CHAMPIONSHIP	1.10M
11	1.15M CHAMPIONSHIP	1.15M
12	1.20M CHAMPIONSHIP	1.20M

ENTRY FORM: FOURWAYS RIDING CENTRE – ENTRIES ACCEPTED ON THE DAY Training Exercise Show Jumping Show : SUNDAY 16th March 2025

Class	Horse	Owner/Rider	CLUB NR	Entry Fee
			TOTAL	

NAME _____

SIGNATURE _____

EMAIL ADD _____

PHONE (W) _____

I/we hereby certify that the above details are correct and that all horses on the Entry Form are currently injected with the influenza vaccination and that the necessary certificate(s) can be produced on demand.

SIGNATURE _____



**FOURWAYS RIDING CENTRE
DAY PADDOCK FORM R100.00 OR
STABLING FORM R200.00**



PLEASE ENQUIRE PADDOCK AVAILABILITY BEFORE MAKING A BOOKING
AND PAYING FOR IT. ONCE AVAILABILITY IS CONFIRMED

PLEASE FILL IN THIS FORM, IN FULL

EMAIL TO: riding@global.co.za

PLEASE PRINT CLEARLY

BANKING DETAILS:

Fourways Riding Centre

First national Bank

Account Number 56350022640

Branch Code 251655

Fourways Mall

NAME:

ADDRESS:

TEL.

NO's:

Work:

Cell:

E-MAIL:

SAEF PASSPORT NUMBER OF HORSE:

IDENTIFICATION OF HORSE:

NAME OF HORSE	STALLION/ GELDING/ MARE	STATE DAYS REQUIRED		TOTAL AMOUNT
		(please fill in date of arrival and departure)		
TOTAL				
Groom's Name:		Cell No:		