

**EVENT**:

## **EQUESTRIAN FEDERATION OF SINGAPORE**

(A Registered Singapore Charity and Institution of Public Character) Affiliated to Singapore National Olympic Council, Singapore Sports Council, Fédération Equestre Internationale & Asian Equestrian Federation

## **EXPRESSION OF INTEREST (EOI) APPLICATION FORM**

AEF CSIY-B, Pattaya 20/02/2025 - 22/02/2025

DETAILS OF ATHLETE		
Full Name (according to your passport)		
Passport No. (Please attach copy)	Nationality	Gender
Date of Birth (dd/mm/yyyy)	Singapore PR (Please indicate)  Yes / No	BLANK
Mailing Address		Postal Code
Email Address		Contact No.
Medical Conditions - Please detail any disability/medical condition(s) that we should be aware of in case of emergency		
EMERGENCY CONTACT DETAILS		
Name	Relationship	Contact No.
<b>COMPETITIVE HISTORY &amp; A</b>	NY RELEVANT INFORMAT	TION
Please include any relevant experience on borrowed/sponsored horse event(s) You may attach results sheets or any additional documents		
I hereby make my application to be considered for selection as the Singaporean representative for the above		
mentioned event, and if selected, agree to abide by the rules and regulations of the competition and EFS.		
Signature		Date

Completed form to be submitted via email to: highperformance@efs.org.sg and admin@efs.org.sg