



TGCA ENTRY FORM

RIDER MEMBERSHIP NO:	OWNER MEMBERSHIP NO:	PARENT/GUARDIAN MEMBERSHIP NO: (JUNIOR COMPETITORS):
ADDRESS.....		
EMAIL.....		MOBILE NUMBER.....
HORSE REGISTRATION NUMBER.....	HEIGHT.....	COLOUR..... Age..... Sex.....
TRADITIONAL <input type="checkbox"/>	MINI COB <input type="checkbox"/>	PART BRED - PONY <input type="checkbox"/> NATIVE <input type="checkbox"/> SPORT <input type="checkbox"/> DRUM <input type="checkbox"/>

CLASS NO:	RIDER NAME	HORSE NAME	ENTRY FEE
		1 st AID per person	£5.00
		FINAL TOTAL	

Entry fees must be paid by PayPal using tgcaheadoffice@gmail.com at the same time as sending this completed form. Entries will not be accepted without payments

I agree to the members handbook rules and above conditions of the TGCA Signed /dated _____

TGCA processes your personal data in accordance with the GDPR. Your personal details will be kept confidential and safe on the secure information server. By signing below, you agree that your data will be processed by the TGCA. The TGCA will never disclose your personal data to third party data controllers without your permission.