

Tournament Registration



Event in: _____ on _____

Rider/Driver

Surname/First Name: _____ Date of Birth: _____

Street: _____ Postal Code: _____

City: _____ Phone: _____

IGF Member yes /RG- _____

Fjord Horse (Please fill out a form for each horse if multiple)

Name: _____ Year of Birth: _____

Father: _____ Mother's Father: _____

Fjords without Papers: Breed certificate available (please attach a copy)

Owner (Name/Address/Phone

No.): _____

Accommodation (please fill out and check)

Horse

Stallion Gelding Mare

Paddock for __ days

Box for __ days

Rider/Driver

Caravan or similar with electricity for __ nights

Tent or similar without electricity for __ nights

The horse is registered for the following competitions (enter the competition numbers e.g. 1, 4, 17, 23) _____

Total entry fee _____ € will be transferred. (Please attach transfer receipt!)

Only fully completed registrations can be processed!!

By submitting the registration, I explicitly acknowledge the regulations as well as the special provisions of the IGF:

Date: _____ Signature Rider/Driver: _____