## STABLING AT KYALAMI EQUESTRIAN PARK

**STABLING FORM**

**PLEASE FILL THIS FORM IN FULL**

**Banking Details: GHS, Nedbank, Epsom Downs, Acc nr: 1522 037 454, Branch: 152205**

**Return to** [**shows@kyalamiparkclub.co.za**](mailto:shows@kyalamiparkclub.co.za) **Tel: 011 036 3320**

**R200.00 per night per horse**

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

**\*Please note that if you put your horse in a stable that is not allocated to your horse you will be disqualified from the show**

**PLEASE PRINT CLEARLY**

**NAME:**

**ADDRESS:**

**TEL. NO’s: Home:**

**Work:**

**Cell:**

**E-MAIL:**

**SAEF PASSPORT NUMBER OF HORSE:**

**IDENTIFICATION OF HORSE:**