

KUWAIT RIDING CENTER
CSI 1* Registration Form
March 20 – 22, 2014

RIDER INFORMATION

NAME:	<input type="text"/>	FEI ID:	<input type="text"/>
DATE OF BIRTH:	<input type="text"/>	EMAIL:	<input type="text"/>
MOBILE NO.:	<input type="text"/>	Country	<input type="text"/>

HORSE INFORMATION

HORSE NAME:	<input type="text"/>
FEI PASSPORT NO.	<input type="text"/>
HORSE NAME:	<input type="text"/>
FEI PASSPORT NO.	<input type="text"/>
HORSE NAME:	<input type="text"/>
FEI PASSPORT NO.	<input type="text"/>

MAX. 2 HORSES + 1 FOR SIX BAR

OFFICE USE ONLY:**PAYMENT:**ENTRY FEE PER HORSE: **KD 120/-**TOTAL: R.V. NO.: **RECEIVED BY:**NAME: SIGNATURE: DATE:

Form is accepted once payment has been received

Form can be sent by email to kalmarzooq@kuwaitrc.com