

NBEA Sanctioned Competition Application Form - Dressage

Competition Name:	Date of Event:
Location:	
Insurance carrier:	(certificate must accompany form)
Competition contact: (Individual responsible for the competition. Co	ntact information will be listed on the NBEA website.)
Name:	NBEA #
Address:	Postal Code
Phone #email	
Manager Secretary	Other
Is this competition organized or sponsored by	by an association or group? Yes No
Name of Club or Association:	
Names of Officials: Judge	EC#NBEA #
Please include the \$25 registration fee, a	copy of the Prize List and the certificate of insurance, with this form.
Method of payment: Credit Card	Cheque Enclosed (Make cheques payable to NBEA)
Name on Card:	Card #
Expiry DateS	Signature:
authorize the amount of to	be charged to my credit card

Please keep a copy for your records and forward one copy to the NBEA
New Brunswick Equestrian Association
900 Hanwell Road, Suite 13
Fredericton, NB E3B 6A2