

NOMINATION FORM (Page 2)

TOTAL AMOUNT OF ENTRY FEES BOUGHT FORWARD FROM PREVIOUS PAGE	\$
INSURANCE LEVY FOR NON QPHA MEMBERS (COMPULSORY \$20)	\$
ADMINISTRATION FEE - \$10 PER PINTO	\$
SPONSORSHIP (Please see note below)	\$
NUMBER OF STABLES (FRI.....) (SAT.....) (SUN.....) STABLES \$30 PER DAY PER PINTO (SAWDUST SUPPLIED)	\$
STABLE BOND AT \$20 PER STABLE (refunded if stable left clean)	\$
NUMBER OF DAY YARDS (FRI.....) (SAT.....) (SUN.....) DAY YARDS \$15 PER DAY PER PINTO	\$
CAMPING AT \$25 PER POWERED SITE PER NIGHT (FRI....) (SAT....) (SUN....)	\$
CAMPING AT \$15 PER NON-POWERED SITE PER NIGHT(FRI....)(SAT....)(SUN....)	\$
BRIDLE NUMBERS AT \$5 PER PINTO ENTERED (refunded at end of competition when number returned)	\$
CHEQUES/MONEY ORDERS MADE PAYABLE TO Q.P.H.A INC. DIRECT DEPOSIT DETAILS - Suncorp Bank. - Qld Pinto Horse Association Inc Bsb - 484-799 Acc No - 506035108 Please make sure your full name is in as reference name.	TOTAL \$
Please provide bank details for Stable Bond Refund (If no details are provided the refunds will be kept as a donation to QPHA Inc) Name: _____ BSB: _____ Acc No _____	
PLEASE INDICATE FOR CATERING PURPOSES IF YOU WILL BE STAYING FOR SATURDAY NIGHT DINNER. PAY ON THE NIGHT. NUMBER OF PEOPLE: _____ ANY FOOD ALLERGIES: _____	
If you would like to sponsor, please fill out this section. If you would like a sponsorship prospectus for all sponsorship offers and benefits please contact us or download from our website. I WISH TO SPONSOR A TROPHY TO THE VALUE OF (please tick): \$25___ \$50___ \$100___ I WISH TO MAKE A SPONSORSHIP DONATION TO THE VALUE OF \$..... I WISH TO SPONSOR OR DONATE GOODS AS FOLLOWS: VALUED AT: SPONSORSHIP NAME:	

NAME OF OWNER OR STUD:

ADDRESS:

EMAIL ADDRESS:

PHONE:

**SEND ENTRIES TO: Q.P.H.A. INC, PO BOX 281, BURPENGARY QLD 4505
OR EMAIL: qldpintos@gmail.com ENTRIES CLOSE: 31st August 2018**