

# EQUESTRIAN WA

## Show Horse Downgrading Application Form

### HORSE DETAILS

SHOW NAME: \_\_\_\_\_

EFA REGISTRATION NUMBER: \_\_\_\_\_ If applicable

Does the above horse hold a current Show Horse Performance Card? YES  NO

If Yes, from which State: \_\_\_\_\_ Note: All States apply

### OWNER DETAILS

NAME OF OWNER/S: \_\_\_\_\_

EFA MEMBERSHIP NUMBER/S: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POSTCODE: \_\_\_\_\_

HOME PHONE No.: \_\_\_\_\_ MOBILE No.: \_\_\_\_\_

EMAIL: \_\_\_\_\_

### PLEASE PROVIDE A BRIEF HISTORY OF KEY PAST PERFORMANCES:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### REASON FOR REQUESTING DOWNGRADE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have read and understand the Unofficial Ring Show Horse Rules and agree to abide by them should my application be accepted.

\_\_\_\_\_  
**APPLICANT'S NAME**

\_\_\_\_\_  
**APPLICANT'S SIGNATURE**

\_\_\_\_\_  
**DATE**

### SHOW HORSE COMMITTEE USE ONLY

Application Accepted: YES  NO  Date of Acceptance: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Show Horse Chair**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

Please return all completed forms to:  
Or email completed form to:

Theresa Marshall, 130 Hardwick Road MILLENDON WA 6056  
[Theresa.marshall@bigpond.com](mailto:Theresa.marshall@bigpond.com)