

## ANNEXURE F

	<h3 style="margin: 0;"><u>TEAM AVAILABILITY FORM</u></h3> <p style="margin: 5px 0 0 0; background-color: red; color: black; padding: 2px;"><b>SECOND PAGE MUST BE SIGNED</b></p>	 <p style="margin: 10px 0 0 0; background-color: yellow; color: black; padding: 2px;"><b>SASA</b></p>
Name of Rider		
Rider SAEF Number		
Registered Name of horse/pony		
Horse/pony SAEF/Passport number		
Owner of horse/pony		
Residential Address		
Tel Number		
Date of Birth (PR & Juniors)		
Identity Number		
Email Address		

**HIGHLIGHTED SECTION TO BE COMPLETED BY NATIONAL OFFICE AND PROVINCIAL SELECTION COMMITTEES**

<b>POINTS OBTAINED IN LAST 12 MONTHS BY HORSE &amp; RIDER COMBINATION</b> (to be inserted by National Office)					
	POINTS	SELECTED		OPEN	CHALLENGE
		YES	NO		
SHOW HACK/PONY					
SHOW RIDING HORSE/PONY					
SHOW HUNTER					
WORKING RIDING HORSE/PONY					
WORKING HUNTER (FOX & OPEN)					

I, the rider of the above-mentioned horse/pony would like to be considered for the PONY RIDER/  
JUNIOR /ADULT ..... (Province) Showing Team. (Select applicable age category).

In the event of my being chosen, I undertake to ensure that the horse and I will be able to attend the Championships. In the event of ill health of myself or the horse/pony and any soundness concerns, or any other circumstance I undertake to inform the Provincial Selection Committee immediately.

My horse is up to date with all inoculations and has a correctly completed passport.

In the event of me being awarded colours, I agree to wear these colours proudly and always put the needs of the Province and my team ahead of my own.

In the event of being nominated for the team, I agree to actively participate and help build team spirit.

I am aware of the financial implications of attending the Championships and am in a position to finance the attendance of these Championships.

I understand that show attendance and results during the previous 12 months will be considered as criteria for Team selection.

I agree to abide by the selection and decisions of the Provincial Team Selection Committee and understand that no discussions or correspondence will be entered into.

I agree to abide by the decisions made by the Team Manager.

**Please email signed and completed form to: [president@gautengshowing.co.za](mailto:president@gautengshowing.co.za)?**

Would you like to be considered for the Adult Inter-Provincial / Challenge Team	
SIGNED (Rider or Guardian if Pony Rider or Junior)	
SIGNED (Owner of horse/pony if not rider)	
DATE	