



Affiliation of SPORT EVENT & Sport classes in 2024

Name of event

NF accepted: YES: NO: Competition Nr

ECAHO Member accepted: YES: NO: Name of ECAHO Member:

Country:

Indoor: YES: NO: Size of the arena/s (W/L):.....Number of stables: SOLID: TENT:

Date of Event:

Name & License of Judges: ECAHO & Intern & Nat Austrian:
.....

CATEGORIES, ECAHO GREEN BOOK/NF /FEI/, please tick level	Novice	Advanced	Master	NCh
Trail Western	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Trail Classic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reining	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Dressage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Show Jumping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Western Pleasure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Classic Pleasure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Traditional Arabian Riding w	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Traditional Arabian Riding cl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ladies Side Saddle w & cl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hunter Pleasure Pleasure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ranch Riding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Others (please state):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Handtrail N & A, Show riding, Horsemanship Cl & W, Children on Lead:.....

Name, address, e mail, telephone number of the responsible organizer: (clear Block letters)
.....

tel.: e mail:

website:

The undersigned herewith explicitly agrees to accept all currently applicable rules, regulations, decisions and the jurisdiction of ECAHO, especially "Green Book 2023", and pledges to apply and enforce them. The undersigned further accepts without restriction the currently applicable status, regulations and jurisdiction of ECAHO. The undersigned herewith confirms to provide event insurance coverage, covering any and all indemnity and/or liability in connection with the conduct of the event. (ECAHO assumes no indemnity and/or liability in connection with the event).

Date and Signature with name in BLOCK letters:.....

Approved by ECAHO Member for National Championships Sport :

Signature & stamp.....

**Please attach proposal of the Schedule which must be approved by the EAHSpC.
Events not approved by EAHSpC cannot be counted in the High Point Horse of the Year.**

Accepted by ECAHO SpC:

Event number: Date and Signature:.....