

**SJI ULSTER REGION**

**TRAINING BOOKING FORM**

Please complete the booking for below, and return via email to cbogle84@gmail.com

I wish to book in for the following training/ assessments:

|  |  |  |
| --- | --- | --- |
| **DATE** | **VENUE** | **PREFERED TIME** |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |
|  |  |  |

**Athlete & Horse/Pony Details**

|  |  |
| --- | --- |
| **Athlete** | **Horse/Pony** |
| **Name:**  | **Name:** |
| **SJI Reg No:** | **SJI Reg No:** |
| **D.O.B.**  | **Height** |
| **Contact Number**  |  |
| **Email:**  |  |

**Payment:**

|  |  |
| --- | --- |
| **Card Details**  | **Other**  |
| Name On Card:  | Please tick if you would prefer to be called to take card details over the telephone  |
| Card No: | Cheques: Made Payable to ‘SJI Ulster Region’ |
| CCV.  | Cash- Only in person before training.  |
| Contact Number : |  |
|  |  |