

# STABLING AT KYALAMI EQUESTRIAN PARK

## STABLING FORM

**PLEASE FILL THIS FORM IN FULL**

Banking Details: KPC, Nedbank, Nicolway, Acc nr: 1522 037 454, Branch: 152205

Return to [shows@kyalamipark.com](mailto:shows@kyalamipark.com)

Tel: 010 023 0712

R230.00 per night/day per horse

**Horses must leave the allocated stables by 10am on the day of Departure.**

| NAME OF HORSE                | STALLION/<br>GELDING/<br>MARE | STATE DAYS REQUIRED<br>(Please fill in date of arrival and departure) |  | TOTAL<br>AMOUNT |
|------------------------------|-------------------------------|-----------------------------------------------------------------------|--|-----------------|
|                              |                               |                                                                       |  |                 |
|                              |                               |                                                                       |  |                 |
|                              |                               |                                                                       |  |                 |
|                              |                               |                                                                       |  |                 |
|                              |                               |                                                                       |  |                 |
| TOTAL                        |                               |                                                                       |  |                 |
| HORSE/PONY (Please indicate) |                               |                                                                       |  |                 |
| Groom's Name:                |                               | Cell No:                                                              |  |                 |

**\*Please note that if you put your horse in a stable that is not allocated to your horse you will be disqualified from the show.**

**PLEASE PRINT CLEARLY**

OWNER'S NAME: \_\_\_\_\_

RIDER'S NAME: \_\_\_\_\_

TEL. NO's: OWNER: \_\_\_\_\_

RIDER: \_\_\_\_\_

ALTERNATIVE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

SANEF PASSPORT NUMBER OF HORSE: \_\_\_\_\_

IDENTIFICATION OF HORSE: \_\_\_\_\_