

SASJ EOI for CSN - National Events 2024



This is an Expression of Interest for the dates for the National Calendar for 2024 (CSN2* and CSN1*) Name of SHB/OC Venue Details **Venue Owner STATUS of SHOW** Name of Event Planned **Titles at Event** Number of Days you would like **First Option Dates Second Option Dates Date of FEI WCQ Class** Date of FEI WCQ Class – Second Option Main Arena Size Planned Classes in Main Arena Number of Arena's for the National Event Size of Practice Arena for Main Arena Date of Last FEI/National show run by the OC Other Arenas to be used – Type and Sizes **Classes planned in the Other arenas Show Director Main Sponsor** No and size of Stables on the Venue No of Stallion Stables Number of Other stables available Total Prizemoney planned (Minimum for the Event) 2nd Arena Size if applicable and Classes planned: Size of Practice Arena for Second Arena **Closest Hospital Closest Veterinary Hospital Paramedic/Medical Services Emergency Screen/Horse Ambulance**

| Venue Insurance Company | | |
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| SIGNED AT For and on behalf of the Show Holding Body | on | _2023 |
| For and on behalf of the Show Holding Body | | |
| Name:S | GIGNATURE: | |
| SIGNED AT | on | 2023 |
| SIGNED AT For and on behalf of the Venue Owner (If not t | the same as the OC/SHB) | |
| | | |
| Name:S | SIGNATURE: | |
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| SLA and Annexures inc Annexure D Criteria will be This EOI will then be part of the SLA | available and will be sent after Co | uncil approval. |
| <u>Comments:</u> | | |
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