

## KwaZulu-Natal Show Jumping Council



## Expression of Interest/Team availability KZN Show Jumping Adult Inter-Provincial Team 2025

Athlete Name				
Athlete Date of Birth				
Athlete Category				
Athlete ID Number				
Contact No.				
Email Address:				
			T	
<u>Horse Name</u>	<u>Current</u>	Grade to be	Qualifying	Available for
	<u>Grade</u>	Entered at Champs	Rounds at this Grade	<u>Team</u>
		Спаттрз	Orade	
*Please submit a copy of you *Teams will be selected as and the completion of this of it merely indicates your avange.  *We ask that if you are <b>NOT</b> well indicating your non-avange.  *If you are entered into a heat the SA Champs competition.  * Should you indicate your of the Champs timeously and prion.  * The onus remains with the received by the KZNSJ Secretive confirmation of you before the submission closing.	per the KZNSJ So document does ilability for select AVAILABLE for so railability in the in- eight you will have eight you will have availability for se r to any team a e rider to ensur- cretary before for our submission). A	election Criteria (, anot mean that you tion selection that you relevant column, ave to compete a election, please er nnouncements. e that this EOI/Tethe closing date	ou will be selected ou please complete so that you are not that height for the asure that you have of submission (more than the submission)	for a team – e the form as of part of the e duration of e entered SA rm has been ake sure you
In order for this EOI to be va (kzn@sashowjumping.co.za to compete at Adult Cham Jumping ASAP.	) by the 6 <sup>th</sup> of Ju	<b>ne 2025</b> . If at any	stage you are no	longer able
Signature		DATE		