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| seg-logo | Samford Equestrian Group Inc.  *Affiliated with the Equestrian Australia* | PO Box 41  Samford QLD 4520 |

**Refund Request Form**

Last Updated: 29th October 2010

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| **Competition/Event Name:** |  |
| **Competition/Event Date:** |  |
| **Rider’s details** | |
| Name |  |
| Address |  |
| Contact # |  |
| Email |  |
| 🞏 SEG Member # 🞏 EA Member #  (if applicable) | |
|  | |
| **Horse / Class Details** | |

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| --- | --- | --- | --- |
| Horse Name |  | | |
| Class /Test |  |  |  |
|  |  | | |
| Horse Name |  | | |
| Class /Test |  |  |  |
|  |  | | |
| Horse Name |  | | |
| Class /Test |  |  |  |

**To receive a refund you must include a Vet Certificate or Doctors Certificate**

Refund form can be posted to:

Treasurer

Samford Equestrian Group Inc.

PO Box 41

Samford QLD 4520

Or emailed to: [treasurer@samfordequestriangroup.com](mailto:treasurer@samfordequestriangroup.com)

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| **Refund Payment Details** | | | |
| Entry Fees Paid: $  Compulsory Fees Paid : $ | | Total Fees Paid: $ | |
| Please make my refund to: | | | |
| **Direct Bank Deposit** | Account Number: | | BSB: |
| Account Name: | | |

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| **PLEASE NOTE: A $2 per ride administration fee will be deducted from your refund as per the SEG Refund Policy. To ensure you receive a refund for competition/event fees please complete this form & post or email it within 30 days of the competition/event date.** |

I declare that the information provided on this correct and complete.

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| Name: | Signature: | Date: |