

COMPETITORS		HORSES						
SURNAMES & FIRST NAMES (capital letters)	FEI REGISTRATION NUMBER	NAMES	PASSPORT N° AND / OR FEI REGISTRATION N°	YEAR OF BIRTH	SEX	COLOUR	BREED	COUNTRY OF BIRTH
9.								
10.								
11.								
12.								
13.								
14.								
15.								
16.								
17.								
18.								

Date: **Signature:**

SEAL OF NF

EVENTING

NAME OF NATIONAL FEDERATION: _____

Name & First Name(s) of Competitor: _____

Date of birth of competitor: _____

Competitor FEI Registration No: _____

Name of horse & FEI Registration number: _____

Age of horse: _____

One Record of Results form per combination athlete / horse to be completed and annexed to the Certificate of Capability.

Athletes and horses must obtain the qualification for the **2014 CH-Balkan-C1*, Shumen (BUL)** at events prior to the Championship until **14th of April 2014**. All athletes and horses must have fulfilled the Minimum Eligibility Requirements by the date mentioned above as combinations; they must have achieved the following minimum eligibility results as follow:

- one CCI1*

Date	Place	CCI1*

The undersigned hereby declare that the above information is correct.

Place & Date:

Competitor:

Place & Date:

President of NF:

Seal of the NF: