

III CONCURSO AECCA GUADARRAMA 2026  
Guadarrma, Madrid 8 de agosto de 2026

Fecha cierre de inscripción 26 de julio de 2026

HOJA DE INSCRIPCION / ENTRY- FORM / FORMULE D'ENGAGEMENT  
(Sólo un caballo por hoja / only one horse per form / un cheval seulement par feuille)

Owner: \_\_\_\_\_ Country: \_\_\_\_\_

Address: \_\_\_\_\_

Tel.: \_\_\_\_\_ E-mail: \_\_\_\_\_

Breeder: \_\_\_\_\_ Country: \_\_\_\_\_

| By the closing date of entries, the horse is registered in the studbook of:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                    |         |       | Country: | Studbook / Association                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Reg. No.                                                                                                                                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------|-------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Class:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Name of the horse: |         | Sire: | S        | I, the undersigned person, engage that I and my employees and assistants hold entire responsibility for the horse entered and I accept without restriction the statutes, regulations and jurisdiction of ECAHO. Furthermore, concerning the horse entered, I agree to declare any actual and/or apparent conflict of interest of myself and/or my employees and/or assistants with the judges.<br><br><b>O There is an actual and/or apparent conflict of interest with judge:</b><br>_____<br><br><b>O There is no conflict of interest with any judge</b> |                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |         | D     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Date of birth:     |         | Dam:  | S        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Sex:               | Colour: |       | D        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                      |
| Qualifications:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |         |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Name of the person who signs the form:</b><br>_____<br><br><b>Address (incl. country):</b><br>_____<br><br><br><br><b>Tel.:</b> _____<br><br><b>E-mail:</b> _____ |
| <b>Pregnant mares (tick if applicable):</b><br><input type="checkbox"/> Mare is pregnant      Last date of service: _____                                                                                                                                                                                                                                                                                                                                                                                                                                    |                    |         |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                      |
| <b>Photocopies of the presently valid registration documents are enclosed.</b><br>This entry form is not valid without signature and the full contact details of the person who signs it.<br>The <b>person responsible</b> for the horse is the registered owner or the lessee, but the person who signs the entry form, the handler, and other support personnel including but not limited to grooms and veterinarians may be regarded as additional persons responsible if they are present at the event or have made a relevant decision about the horse. |                    |         |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                      |
| <b>Capacity in which you sign</b> (owner, trainer, assistant, other – please state):<br><b>Date &amp; Signature:</b> _____                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |         |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                      |