



## European Team Cup 2013

Classes Offered: Trail, Western Pleasure, Western Horsemanship, Showmanship at Halter, Reining, Hunter Under Saddle, Hunt Seat Equitation, Western Riding

Deadlines: 13. August for team entry

Entry Fee: 200 €

Entry to: Show Office

Please use the nomination form to enter your team.

### Information & Conditions:

1. The teams shall be entered by the national affiliate of the American Quarter Horse Association (nation) by the respective team leader./contact person.
2. Each team must consist of 3-5 riders.
3. All Classes but trail will be conducted class-in-class with the second go of the European Championships, taking place on Wednesday-Thursday August 14-15. The two trail classes (one for Youth and one for Amateur) will be conducted as the final class on Saturday August 17.
4. Participants in the team cups all need to also be participants in the European Championships concomitant classes (European Championships second go).
5. The team with the highest number of points will be declared the European Team Cup Winners.
6. An award ceremony will take place Saturday evening, August 17 following the final (Trail) classes
7. The winning team will receive buckles. The three best placed teams will receive medals (Gold, Silver, Bronze)
8. Medication/Doping rules equivalent with the FEQHA rules applied at the European Championships.
9. For any further specific information, please see the Rules and Regulations document.

# European Team Cup 2013

## Nomination Form

### Amateur

DEADLINE : 13. August 2013 (show office), 6 p.m.

NATION : \_\_\_\_\_

TEAM-LEADER : Name: \_\_\_\_\_

Mobile Phone \_\_\_\_\_

TRAIL : 1. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

2. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

PLEASURE : 1. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

2. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

HORSEMANSHIP : 1. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

2. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

**FEQHA**  
FEDERATION  
OF  
EUROPEAN  
QUARTER  
HORSE  
ASSOCIATIONS



REINING :

1. Rider (Name) / Horse (Name, Registration-#):

---

2. Rider (Name) / Horse (Name, Registration-#):

---

SHOWMANSHIP :

1. Rider (Name) Horse (Name, Registration-#):

---

2. Rider (Name) Horse (Name, Registration-#):

---

HUS :

1. Rider (Name) Horse (Name, Registration-#):

---

2. Rider (Name) Horse (Name, Registration-#):

---

HSE :

1. Rider (Name) Horse (Name, Registration-#):

---

2. Rider (Name) Horse (Name, Registration-#):

---

WESTERN RIDING :

1. Rider (Name) Horse (Name, Registration-#):

---

2. Rider (Name) Horse (Name, Registration-#):

---

I accept and understand the terms and conditions of this European Team Cup. In signing this form I am declaring compliance with the rules and regulations of the AQHA Rulebook and the FEQHA rules on medications.

---

Date / Signature Team-Leader

# European Team Cup 2013

## Nomination Form

### Youth

DEADLINE : 13. August 2013 (show office), 6 p.m.

NATION : \_\_\_\_\_

TEAM-LEADER : Name: \_\_\_\_\_

Mobile Phone \_\_\_\_\_

TRAIL : 1. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

2. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

PLEASURE : 1. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

2. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

HORSEMANSHIP : 1. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

2. Rider (Name) / Horse (Name, Registration-#):  
\_\_\_\_\_

**FEQHA**  
FEDERATION  
OF  
EUROPEAN  
QUARTER  
HORSE  
ASSOCIATIONS



REINING :

1. Rider (Name) / Horse (Name, Registration-#):

---

2. Rider (Name) / Horse (Name, Registration-#):

---

SHOWMANSHIP :

1. Rider (Name) Horse (Name, Registration-#):

---

2. Rider (Name) Horse (Name, Registration-#):

---

HUS :

1. Rider (Name) Horse (Name, Registration-#):

---

2. Rider (Name) Horse (Name, Registration-#):

---

HSE :

1. Rider (Name) Horse (Name, Registration-#):

---

2. Rider (Name) Horse (Name, Registration-#):

---

WESTERN RIDING :

1. Rider (Name) Horse (Name, Registration-#):

---

2. Rider (Name) Horse (Name, Registration-#):

---

I accept and understand the terms and conditions of this European Team Cup. In signing this form I am declaring compliance with the rules and regulations of the AQHA Rulebook and the FEQHA rules on medications.

---

Date / Signature Team-Leader