



## ATHLETE EXPRESSION OF INTEREST

### *2018 Atlantic Canada Equestrian Championships*

**This signed form must be returned to NSEF by the Expression of Interest Deadline of June 25<sup>th</sup>, 2018**

Competition Discipline:			
Dressage	September 14-16, 2018 – Sussex, NB	<input type="checkbox"/> Training Level	<input type="checkbox"/> First Level
Horse Trials	September 29-30, 2018 – PE	<input type="checkbox"/> Entry	<input type="checkbox"/> Pre-training
Jumping	October 6-7, 2018 – Sussex, NB	<input type="checkbox"/> 1.0m	<input type="checkbox"/> 1.1m
Reining	September 8-9, 2018 – Crapaud, PE	<input type="checkbox"/> One Handed	<input type="checkbox"/> Two Handed
Athlete's Name:		Date of Birth: YY/MM/DD	Parent or Legal Guardian's Name (if athlete is under 19):
Address:			
Home Phone:		Cell Phone:	
Email Address:			
NSEF Number:	EC Sport License Number:	Coach's Name:	

I, \_\_\_\_\_, am expressing my interest in qualifying to compete as a member of the Team Nova Scotia at the *2018 Atlantic Canada Equestrian Championships*. I understand that the NSEF is using this expression of interest to determine if there is commitment for a level of the team. I understand I must **submit a \$25 declaration fee** to the NSEF prior to my first eligible qualifying competition. I am aware that by date indicated by discipline on NSEF ACE Athlete document, the horse that I will be riding at ACE must be declared. I understand there the costs associated to qualifying and competing on Team NS that are my financial responsibility. It is also understood, I will actively participate in fund raising opportunities for the Team. I understand that I am to submit my results for eligible classes. I further understand that I must meet all Athlete Eligibility Criteria in order to be considered for team selection.

Athlete Signature:	Date:
Parent or Legal Guardian's Signature (if under 19 years of age):	Date:

<b>OFFICE USE</b>	Date Received:	Date Fee Received:	Payment Type:
	Date Athlete Package Sent:	Results Received:	Eligible:

Please remit completed form: NSEF 5516 Spring Garden Road, 4th Floor Halifax, NS B3J 1G6 or  
[nsefmembership@sportnovascotia.ca](mailto:nsefmembership@sportnovascotia.ca) (Sheila) Questions? Email or call Sheila (902-425-5450 ext 337)