

# CASTLEPOINT RACING CLUB (Inc)

15<sup>th</sup> March 2025

## NOMINATION FORM

**A separate nomination form is required for each entry.**

Name and Address of Owner

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Tel. No \_\_\_\_\_

Email \_\_\_\_\_

Event No \_\_\_\_\_

Name of Rider \_\_\_\_\_

Horse Name \_\_\_\_\_

Horse Age & Sex \_\_\_\_\_

Horse Colour \_\_\_\_\_

Sire \_\_\_\_\_

Dam \_\_\_\_\_

Colours worn \_\_\_\_\_

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Class of Horse (if known) \_\_\_\_\_