

ABHR Showcase Brumby Of The Year Award

ABHR Member:

ABHR Member Number:

Name Of Brumby:

ABHR Registration Number:

Name Of Show:

Date:

Please list the class number of the show program and the name of the class below. Also include if you compete in Supreme Champion Led class. Have the show office staff stamp or sign your card.

Class Nbr	Name of Class

Show Stamp/Signature:

Mail your card to: ABHR Registrar,
197 Congarinni Rd North. Macksville NSW 2447

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