

EUROPEAN ARAB HORSE SHOW COMMISSION



Application for ECAHO - Handler Permit

Please fill in and return the duly signed original by priority mail to:

**ECAHO Office, Viola Speier, Tribseeser Chaussee 12, 18334 Bad Sülze, Germany
Phone +49 38229 794952 Fax +49 38229 794951, viola.speier@ecaho.org**

Name _____ First Name _____

Address _____

Zip code _____

Town _____ Country _____

e-mail: _____ Phone: _____

Handler's Declaration:

I, the undersigned applicant for an ECAHO Handler Permit, agree that delivery of this authorization is subject to the approval of ECAHO's European Arab Horse Show Commission (EAHSC).

I, the undersigned applicant for an ECAHO Handler Permit, herewith explicitly and unconditionally agree to accept the ECAHO constitution and jurisdiction and all applicable rules, regulations and decisions of ECAHO.

I accept that the ECAHO Handler Permit may be revoked with immediate effect in case of infringement of the ECAHO constitution and jurisdiction and applicable rules, regulations and decisions of ECAHO.

Name in Block letters: _____ **Signature:** _____

Place & date: _____

Please send a digital Passport Photo BY EMAIL ONLY to viola.speier@ecaho.org

The Permit will be delivered to your address once your service charge of € 10.00 has been transferred to our Account: Credit Suisse, CH-9001 St. Gallen - Account No. 0637-581229-42, Clearing

No.: 4637 –Account holder: ECAHO, Goethestrasse 61, CH-9008 St. Gallen – Switzerland, CHF: IBAN-Nr.:

CH4904835058122941000, BIC: CRESCHZZ90A,

EUR: IBAN-Nr.: CH150483 5058122942000, BIC: CRESCHZZ90A,

USD: IBAN-Nr.: CH8504835058122942001, BIC: CRESCHZZ90A

ECAHO Office, Viola Speier, Tribseeser Chaussee 12, 18334 Bad Sülze, Germany

Phone +49 38229 794952 Fax +49 38229 794951, viola.speier@ecaho.org

website : www.ecaho.org

Revised: January 13th, 2009