



# THE 2011 EQUESTRIAN QUEENSLAND AWARDS EVENING



## GUEST NAMES

Please Provide the Names of All Guests Included on This Booking,

- Note any Children as (Child) after the name.
- Note any Special Dietary Requirements (ie. Vegetarian) after the name
- Please advise if any seating arrangements are required.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

Seating Arrangements \_\_\_\_\_

PLEASE RETURN COMPLETED FORM AND PAYMENT  
by 4.00pm, Monday 14 February 2012

**By Fax:** Complete and fax this form to 07 3891 3088

**By Mail:** Complete and send with payment to :

Equestrian Queensland,  
PO Box 1358,  
Coorparoo DC Qld 4151

