High Plains Recreational Rider Program Report Form

Recreational Rider Chair: Patti Blichmann 12741 S Lewelling Rd Carbondale, KS 66414
www.highplainspfha.org

Horse Name _____ Paso Fino _____ Other Gaited_____

Rider

Name _____

Address _____

City _____ State _____ Zip _____

If this is a Youth Rider, check here for points to count towards Youth High Points ☐

Owner

Name _____

Address _____

City _____ State _____ Zip _____

Show/Event Information

Enter activity in first column-Sport Horse (SP), Endurance (END), Competitive Trail (COMP) In second column enter the name of competition. Third column class, division etc.. Have Competition Mgr. initial in fourth column, your placement, or miles in the appropriate column. When page is full mail to the RR Chair. All pages must be submitted by Sept 30 for points to count.

	Name of Competition	Division	Show Mgr. Initials	Placing	Judges Condition Score	Miles
SH	Example: 4H	Open Show		1		

We, the undersigned do hereby certify that the horse listed on this report did in fact enter and place in the event stated in this report

_____ _____ _____

Exhibitor's Signature Date Phone #

_____ _____ _____

Owner's Signature Date Phone #