



# The Canadian Morgan Horse Association Inc.

## L'Association des Chevaux Morgan Canadien Inc.

### YOUTH AWARD SYSTEM - ENTRY FORM (July/04)

PLEASE: Fill out forms completely, correctly and legibly. This form becomes part of the show record.

All horse, owner or lessee information need only be filled out with first entry form per season.

**NOTE: Only EC or USAEq shows count for points. Forms must be postmarked within 30 days of show date.**

Please read the rules carefully.

NAME OF HORSE: \_\_\_\_\_ REG #: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ SEX: \_\_\_\_\_

SIRE: \_\_\_\_\_ DAM: \_\_\_\_\_

NAME OF REGISTERED OWNER OR LESSEE: \_\_\_\_\_ eMail: \_\_\_\_\_

MEMBERSHIP NUMBER (CMHA#): \_\_\_\_\_ PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CODE: \_\_\_\_\_

NAME OF YOUTH: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

MEMBERSHIP NUMBER (CMHA#): \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME OF HORSE SHOW: \_\_\_\_\_ SHOWDATE: \_\_\_\_\_

SHOW RATING (EC, Provincial, etc.): \_\_\_\_\_

NAME OF JUDGE: \_\_\_\_\_

SHOW SECRETARY NAME: \_\_\_\_\_ eMail: \_\_\_\_\_

SHOW SECRETARY ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

Class No.	NAME OF CLASS (full name according to prize list)	CH.	Div. No.	Ribbon	No. Shown	Points
						Leave Blank

DIVISION:

B C D E I J

Total Points

Leave Blank

I hereby certify that the information provided is to the best of my knowledge correct and that I make these entries subject to the rules of the Award System and I agree to be bound thereby.

FORMS MUST BE SIGNED BY AUTHORIZED PERSONNEL: \_\_\_\_\_  
(Signature of owner or agent)

Class Number - from prize list  
Name of class - full name  
according to prize list

Ribbon - Ribbon Received  
1st - 10th only  
No. shown: Number of horses actually shown in class

CH - Place an "X" if championship, stake or futurity

DIVISION NO: (See Rule Sheet Also)

- B) ENGLISH PLEASURE
- C) WESTERN PLEASURE
- D) PLEASURE DRIVING
- E) PARK OR ROADSTER
- I) EQUITATION
- J) HUNTER

**Print, sign and mail 2 copies to your ZONE RECORDER. Keep 1 copy for your records**

VERSATILITY/COMBINATION CLASSES TO BE PLACED  
IN ONE DIVISION OF OWNERS CHOICE.

DATE RECEIVED: \_\_\_\_\_  
(Office use only)