



TCHA#: _____ DATE: _____

NAME: _____
(as you would want your name on your year end award)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

AGEGROUP: _____ AGE ON JAN 1ST: _____

HORSE'S NAME: _____
(as you would want your horse's name on your year end award)

SEX: _____ AGE: _____ BREED: _____

DATE OF NEGATIVE COGGINS: _____

DATE: _____ SIGNATURE: _____

TELEPHONE NUMBER: () _____

EMAIL: _____