

AHAM DRESSAGE RESULTS 2020

NAME OF OWNER _____

NAME OF HORSE _____

NAME OF RIDER _____

REGISTRATION # _____

Please Check Junior () Adult () Arabian () Half Arab () Non Arab ()

NAME OF SHOW	STATE	DATE	AFFILIATION	NUMBER IN CLASS	PLACING OR TEST SCORE	NAME OF EXHIBITOR	OFFICIAL USE

MUST SEND a copy of Test Scores for points to count

Score Sheets must be submitted each month.

Mail To:

AHAM
 12 Millville Road
 Mendon, MA 01756

Please reproduce sufficient copies as needed