WHVPHA SHOW RESULTS REPORT FORM

HORSE SHOW NAME:

HORSE SHOW DATE:

DIVISION/CLASS NAME:

Check Payable to WHVPHA. Total Number Entered _____ x $5 per entry (you must include all participants members and non members) = _____ (*9 or more entries in classes is double points so it is important to include all entries in class regardless of membership) Mail Check/Results to WHVPHA c/o PO Box 336, Montgomery, NY 12549 Send results to: Email to whvphapoints@gmail.com SHOWPRO Electronic results to whvphapoints@gmail.com. WHVPHA numbers can be found at. www.WHVPHA.org website under Points page Members or Horses. Results must be submitted with in 2 weeks of show date or $50 per week fine will be imposed. Incomplete applications cannot be processed.

Place	Horse/Pony Name	Horse/ Pony WHVPHA #	Horse/ Pony	Child/ Adult	Rider Name	Rider WHVPHA #	Height Jumped	Division if Combined
1								
2								
3								
4								
5								
6								
7								

Place	Horse/Pony Name	Horse/ Pony WHVPHA #	Horse/ Pony	Child/ Adult	Rider Name	Rider WHVPHA #	Height Jumped	Division if Combined
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								