

## FHANA Performance Western Dressage Award

Owner of Horse: \_\_\_\_\_ R#: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

FHANA/KFPS Reg Name/Number: \_\_\_\_\_

Region: \_\_\_\_\_ Competition Year: \_\_\_\_\_

Name of Rider: \_\_\_\_\_ R#: \_\_\_\_\_

**The competition year is defined as starting Dec. 1<sup>st</sup> of the previous year and ending Nov. 30<sup>th</sup> of the current year.**

**Applications are due Nov. 30**

Date	Show	Class	Type of Show	Level Points	% Points	Total Points

Total \_\_\_\_\_

**I hereby certify that these results/placings are valid as submitted**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_