OHSA 2021 Competition Form



OPEN HORSE SHOW ASSOCIATION

show locally . . . achieve nationally

This form covers only one horse/rider combination and one show, and must be completed in its entirety. Members must include a show premium list, show bill, or show schedule with this form. Reports submitted with incomplete information will not be accepted. Please write legibly.

Horse Parti						Hor	se OHSA Par	ticipation Nu	mber H77	71	
	icipation Regist	tration Name	That Funky	Monkey			nber Number				
Member Na	ame Leah Sr	malley									
Name of S	how Shrine	Charitiy I	Horse Sho	ow - Dre	ssage		v Date 8/22			In	idiana
Location of	f Show (arena i	_{name)} Mizpa	ah Shrine	Ground	S Show C		nbia City				ı
		Dy C	hring Cha	ritiv Hor	se Show	/ Judg	ge's Name	Janic	·e.5	nit	h_
Show is Ap	ow or event ref	insored by C	list balany on	h class ent	ered and the		- ad		ladia	nto in th	e first columi
For the sho	ow or event ref was a 2 gait (v number refers	erenced above walk trot; walk	; list below eac (jog; 2 gait) cl	lass. In the	second col	lumn indica	te the type of	f seat ridder asses correct	n if the class tly). Use the	s name i chart be	s not specific low to determ
The class	number refers earned in each	to the number	on the show's etition Forms w	class list (tr ill be audite	d for accura	nsure we ma cy!	iten up the sie		# in	Placing	Points
W/T	Hunt Seat/	Class Number	Class name	1.5			41148	* 1 4 1	Class		
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×	D	103	Dressage Seat Equitation						0		
×	D	105	USDF Introductory Test A							/	
	D				4	1	1				
X	1	106	USDF Int	roducto	ry rest E)			7		
									_		
compliand Exhibitor's	that the horse be with OHSA C s Signature rward this comp ust be mailed	Competition Rubleted report, a or emailed to	along with a sho	4, 5, and 6 bw bill.	Date	6/22	12/				
		Laanfirm	that the named	horee and	member did					and will p	
As show N	the request of	OHSA up to or	ne year from the	e date of thi	s event.	compete and	d place as inc			and will p	rovide formal
As show N	the request of	OHSA up to or	ne year from the	e date of thi	s event.		d place as inc			and will p	
As show Meresults at	Manager/Secre the request of of nager/Secretary thone 260	OHSA up to or y's Signature	Conna	e date of thi	s event.	compete and	d place as ind	licated above	e and I can a		rovide formal
As show Mresults at	the request of one	OHSA up to or y's Signature	Conna	e date of the	Date E-mail	compete and \$\begin{align*} & Arin ded Chart \$ \text{ded Chart} \$ \text{ded Chart}	d place as inco	dicated above	e and I can a		
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