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 Participation Registration Name That Funky Monkey

Horse OHSA Participation Number H771

Member Name Leah Smalley

Member Number 100566

Name of Show Neigh Show - BEVERLY RINKER MEMORIAL

Show Date 8/21/2021

Show State Indiana

Location of Show (arena name) Mizpah Shrine Grounds Show City Columbia City

Show is Approved or Sponsored By Shrine Charitiy Horse Show

Judge's Name Claire Meyn

For the show or event referenced above, list below each class entered and the placing (use 2nd page of form if necessary). Indicate in the first column if the class was a 2 gait (walk trot; walk jog; 2 gait) class. In the second column indicate the type of seat ridden if the class name is not specific. The class number refers to the number on the show's class list (this will help ensure we match up the classes correctly). Use the chart below to determine

the points earned in each class. Competition Forms will be audited for accuracyl

W/T	Hunt Seat/ Saddle Seat/	Class Number	Class name	# in Class	Placing	Points
Х	Western	1	W/T Equitation on the Flat - GP Division	3	2	2
X	H		Equitation over ground poles - trot only - GP Division Hunter Pleasure Horse or Pony W/T - GP Division	3	1	3
			Dir Champion			
			·			

We certify that the horse named on this report did in fact enter and place in the class(es) as listed on this report. Submission of this form indicates compliance with OHSA Completition Rifles, Articles 3, 4, 5, and 6.

Exhibitor's Signature

Date 8/21/21

Please forward this completed report, along with a show bill.

Forms must be mailed or emailed to the address below within 60 days of the date of the show. Forms must be received no later than January 31, 2022.

As show Manager/Secretary, I confirm that the named horse and member did compete and place as indicated above and I can and will provide formal results at the request of OHSA up to one year from the date of this event.

Show Manager/Secretary's Signature Coma Mella

Date 8/21/21

Contact Phone 260-402-7487

E-mail shrine charityhorse showemiller Demarkoun

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# of Horses in Class	1st Place	Points Awar 2 nd Place	3 rd Place	4th Place	5th Place	6 th Place
1	1					3
2	2	1				
3	3	2	1			
4	4	3	2	1		
5	5	4	3	2	1	
6-9	6	5	4	3	2	1
10-14	7	6	5	4	3	2
15-19	8	7	6	5	4	3
20-24	9	8	7	6	5	4
25+	10	9	8	7	6	5

OHSA

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