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

snow bill, or snow schedule	with this for	iii. Keports su	ionnited wi	ın incompiete	information	will not be a	ccepted. Plea	ase write legi	ibiy.		
Horse Participation Registration Name That Funky Monkey					Н	Horse OHSA Participation Number H771					
Member Name Leah Smalley					М	Member Number 100566					
Name of Show Neigh	Show	Sorie	S		Sh	ow Date	0-2-	21	······································		
Location of Show (arena nar	me)Blac	k Dog F	Farn	Show	City MA	RION		Show	State /	WDIAN	
Show is Approved or Sponso		-					Sara	Rato	h		
For the show or event refere the class was a 2 gait (wall The class number refers to t the points earned in each cla	enced above k trot; walk the number	, list below ea jog; 2 gait) c on the show's	ch class e lass. In ti class list (ntered and th he second c this will help	e placing (us olumn indic ensure we m	se 2 nd page o ate the type	f form if nece	essary). Indi en if the cla	icate in th	is not specif	
W/T Hunt Seat/	Class Number	Class name		100	The second secon	28.00 41.00 500	English Pensis	# in Class	Placing	Points	
(YH)	and the second	GP Di	v w/	T 860 C	on th	2 flood		3	2	2	
XX	2	GP Di	V Els	over B	hound	Rails.	-trot	3	1	3	
L X	3	3P Div	Hur	nter Pl	easily	e Hors	sew1	3	3	j	
X H	TOPC	Groun	d Po	le Clo	1551c			3	j	3	
					33.00						
We certify that the horse nan					e class(es) a	s listed on th	is report. Su	ıbmission of	this form	indicates	
compliance with OHSA Com	petition Rul	es, Articles 3,	4, 5, and 6			- 1					
Exhibitor's Signature	and the	aller	1	Date	10-2	-21					
Please forward this complete forms must be mailed or e	ed report, ale	ong with a sho	ow bill.	n 60 days of	tha rista of	tha chauc E	arma must by	a randizad ne	a latar tha	m lamuan: 24	
							***************************************	*****************************	***************************************	***************************************	
As show Manager/Secretary, esults at the request of OHS	, I confirm tr SA up to one	e year from the	horse and date of the	is event.					and will pr	ovide formal	
Show Manager/Secretary's S	Signature	260-341-	0335	Date	10-	1-2	/				
Contact Phone (In	asle	Chi		E-mai	alm	y99210	l Anonties	e.com			
				Points Awar			2900	1980. 1980.			
# of	Horses in C		1 st Place	2 nd Place	3 rd Place	4th Place	5 th Place	6th Place			
2			2	1					1		
3			3	2	1				1		

The second second		ded Chart				
# of Horses in Class	1st Place	2 nd Place	3rd Place	4th Place	5 th Place	6th Place
1	1					
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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