2010 GRANITE STATE APPALOOSA ASSN.
OPEN SHOW/TRAIL RIDE POINT FORM

Horse Name_____Back#: _____

Owner_____

Exhibitor Name _____DOB If Youth_____

Phone Number_____Email_____

SHOW OR TRAIL RIDE NAME_____
Please attach the class list of the horse show or Trail ride flyer

Date	Class# & Class Name *non-app classes*	Eng/west E OR W	Class Size	Your placing	Show Secretaries Name Signature & Phone#

**All sections must be filled out in full or form will be null and void. **

Trail Ride Date_____Name of Rider_____Miles_____

Trail Ride Secretary's Signature_____

- **Forms must be received within 30 days of the show or trail ride or will NOT count.**
- **Final Forms must be received no later than October 31st , 2010**

SEND COMPLETED FORM TO:
Linda Coyle, 4 Crown Hill Road, Atkinson, NH 03811

Created on 1/15/2009 2:01:00 PM