

2024 KAHABA Competitive & Endurance Competition Event Verification

This report covers only one horse and one competition, and must be completed in its **entirety**.
KAHABA will have final approval of this event and Points.

Horse Name: _____ AHA Reg. # _____

Name of Event: _____ Date: _____

Location of Event: _____

Event Sponsored By: _____

Event Manager: _____

List below: type of ride, competitive or endurance, mileage, placing and completion time. * There is a cap of 15 points to be earned by a single horse in a year. *****

Type of Ride	Mileage	Placing	Office Use: OEIP PTS

We certify that the horse listed on this form, did in fact enter in the classes listed above

Riders Name: _____ Date: _____

Riders Phone #: _____ Email: _____

Owner (nominator) of Horse signature: _____ Date: _____

As ride Manager or Secretary, I confirm that the horse did enter & compete as indicated above, and also agree to provide KAHABA formal results of this ride or event for up to one year from date of ride.

Ride Manager or Secretary Signature: _____ Date: _____

Phone #: _____ Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

**Please return this form to the membership chairperson within 30 days of the event:
 Katie Lauer 12527 Shaw Goetz Rd California, KY 41007 Phone # 859-444-0204 Email: caitlynlauer@yahoo.com
 NO POINTS WILL BE REWARDED WITHOUT COMPLETED and SIGNED FORM! *** Points will be capped at 15 total points per horse, per year. *** Please mail or email to the above address. KAHABA is not responsible for delivery of any correspondence.**