

2014 ParaEquestrian Award Submission Form Must be submitted by October 6, 2014

This form is required	if you are ap	oplying for th	e ParaEquestrian A	Award.		
Name of Rider:						
Name of Owner:						
Name of Horse:						
Criteria – Please se	e full criteria	details on v	website www.otta	wadressage.ca		
Results: Please list y If any scores are fro where scores can b	m external s				ose scores, or incl	ude website
Show Location	Date	Class	Judge(s)	Score	Website	
Sum of top three sco	res:	_	1			
Rider's Signature:			E-mail:			
Contact Phone Num	ber:	 				
Mail to: Or			email to: awards@ottawadressage.ca (signature not required)			
Catherine Maguire, C 1200 Clayton Road, I Almonte, ON K0A 1A0 Must be received by	RR1	s Director	(3 ***	, ,,		