



USEA Area II
2018 Year-End Awards Program
Registration Application

RIDER INFORMATION:

Name: _____ USEA # _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Telephone: _____

Birth date (JR/YR): _____

HORSE INFORMATION:

Name: _____ Age: _____

Breed: _____

USEA: _____ Sex: _____ Color: _____ Height: _____

OWNER INFORMATION:

Name: _____ USEA # _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Telephone: _____

DIVISIONS AND FEES:

LEVEL:	DIVISION (Select only ONE per level):	Fee:
<input type="checkbox"/> Beginner Novice	<input type="checkbox"/> Jr/YR <input type="checkbox"/> Adult Amateur <input type="checkbox"/> Open <input type="checkbox"/> Young Horse	\$20.00
<input type="checkbox"/> Novice	<input type="checkbox"/> Jr/YR <input type="checkbox"/> Adult Amateur <input type="checkbox"/> Open <input type="checkbox"/> Young Horse	\$20.00
<input type="checkbox"/> Training	<input type="checkbox"/> Jr/YR <input type="checkbox"/> Adult Amateur <input type="checkbox"/> Open <input type="checkbox"/> Young Horse	\$20.00
<input type="checkbox"/> Modified	<input type="checkbox"/> Jr/YR <input type="checkbox"/> Adult Amateur <input type="checkbox"/> Open <input type="checkbox"/> Young Horse	\$20.00
<input type="checkbox"/> Preliminary	<input type="checkbox"/> Jr/YR <input type="checkbox"/> Adult Amateur <input type="checkbox"/> Open <input type="checkbox"/> Young Horse	\$20.00

<input type="checkbox"/>	Intermediate	<input type="checkbox"/>	Jr/YR	<input type="checkbox"/>	Adult Amateur	<input type="checkbox"/>	Open	<input type="checkbox"/>	Young Horse	\$20.00	
<input type="checkbox"/>	Advanced	<input type="checkbox"/>	YR	<input type="checkbox"/>	Adult Amateur	<input type="checkbox"/>	Open	<input type="checkbox"/>	Young Horse	\$20.00	
										Total Registration Fees (one per level)	
										Late Fee (see rules for schedule)	
										Total Fees Enclosed for this horse/rider	

*Please Note: Points will not be counted until
Volunteer Hours have been Completed. Please refer
to the rules for details*

Please include the following information if you have already competed this season:

Area	Horse Trial Name	Date	Level Entered	Placing

Submit completed forms and payment made out to USEA Area II Year End Awards to

Ann Baumgardner
15 Bellevue Lane
Washington VA 22747

annbaumgardner1@gmail.com