Canadian Warmblood Horse Breeders Association
AWARDS PROGRAM · RESULTS REPORTING FORM

Horse: _____ CWHBA #: _____

Owner/Lessee: _____ CWHBA #:_____

Show: _____ Circuit _____

Date yy-mm-dd	**Class**	**Judge**	**Placing (1-6)**	**Office Use Only Points**
			Total Points	

I, _____owner/lessee of _____ indentified above, do swear that the above information is true.

Owner's/Lessee's Signature: _____

Multiple forms can be used for a show, but only one show per form please.
Submit completed forms by mail, fax or email. Indicate 'AWARDS PROGRAM'

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