

TO PRESERVE, PROTECT AND PROMOTE THE WALKING HORSE

WWHA Registration #:

Points Affidavit

WWHA Horse Name:

Please fill out information on this form legibly using black or blue ink. Event Secretaries are encouraged to complete this form, but regardless of who completes the form, information must be verified and signed by the Event Secretary or other qualified Event Representative. Registration papers and/or membership card should be presented to the Event Secretary/Representative for confirmation. Return to PO Box 2919 Alvin, TX 77512, or scan and email to Thefuture@worldwha.org

WWHA Member Name:				WWHA Member #:		
City		State	Country			
Program(circle all applica	able):					
Breed Points	Open	Trail	Distance	Ambassadors	hip	
Division(circle all applica	able):	Nalki	ng 4			
Youth	Amateur	1 5	Open			
	* * * EVF	ENT SPECIFI	C INFORMATIO)N * * *		
For Show/Competition:						
Class Name	Description (see WWH)	A Handbook)	est. 2013	# of Entries	Final Placing	
2 Gait Pleasure 14-18		t English Barefoo		5	2	
		% 'u	OIJS;			
			- 4			
For Trail/Distance:						
#of Miles Logged:		Condition	(if Applicable):			
Type of Event:						
Achievements (if applical	ble):					



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	Event	# of Participants/Audience	Length of Event	Walking Horse Specific?
Demonstration	1	0 (2-10 people)	1 (2 days)	1 (if yes)
Show	1	1 (11-100)	2 (3-4 days)	
Clinic	1	2 (101 – 1000)	3 (over 4 days)	
Group Trail Ride	1	3 (1001 – 20,000)		
Alternative Competition	1	4 (over 20,000)	40,	
Equine Expo	1	0	Se	
Volunteerism	1		AS	
Seminar	1	est.	2013	
		4/ 'uo!	Total Points Earned:	

* * * SIGNATURE REQUIRED BELOW * * *

This Affidavit Is To Be Signed by Applicant and Event Secretary:

and true to the best of my knowledge	. I am signing as a representative in	nat the foregoing information is correct good standing with my own le to record and submit the foregoing
Event Representative	Position	Date
Event Participant (or Responsible Pa	Date	