

# Welsh Pony & Cob Society of America Open Competition Program Registration Form

Nomination fee: \$10 per animal, per competition year. Submit with this form.

Submit to Open Competition Secretary: WPCSA, 720 Green St., Stephens City, VA 22655

Competition year ends November 30th. Owners/Riders/Drivers must be members of WPCSA.

Pony/Cob 1:		Registration number:
Date of Birth:	Registered Owner: _	Owner's membership #:
Owner's address: _		
Telephone:		_ E-mail:
Pony/Cob 2:		Registration number:
Date of Birth:	Registered Owner: _	Owner's membership #:
Owner's address: _		
Telephone:		_ E-mail:
Pony/Cob 3:		Registration number:
Date of Birth:	Registered Owner: _	Owner's membership #:
Owner's address: _		
Telephone:		_ E-mail:
	heck with each competition form	Please bill my credit card each time I submit a form for the competition year 20 Billing Address
□ Visa □	Mastercard Card numbe	er:/Expiration date:/
Signature:		Please make checks payable to WPCSA.

# CHAMERICA INC.

# **WPCSA Open Competition Program**

Submit to Open Competition Secretary: WPCSA, 720 Green St., Stephens City, VA 22655

Owners/Riders/Drivers must be members of WPCSA.

#### **Entry Form A (Carriage Driving & Open Show)**

Competition year ends November 31.

All results must be postmarked within 30 days of completion of show.

A copy of the show prize list must be submitted for each competition reported.

Report one horse and one show per form. \$5 fee per show.

If a horse has multiple riders/drivers, use separate sheet for each rider/driver.

lame & Address of Shov	v Secretary:						
Pony/Cob:		Registration	#:				
	Owner			Rider/D	river		
Name:		Name:					
Address:		Address:					
City:		City:					
WPCSA Member #:	Phone# ( )	WPCSA Member #: Phone# ( )					
					FOR OFFIC	E USE ONLY	
*Class Type	Name of Class		Class #	Placing	Year End Points	Medallion Points	
***	Tallah Blassas MB - Mastasa Blassas E - E - C						

Name of Show: \_\_\_\_\_ Date(s) of Show: \_\_\_\_\_



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#### **Entry Form B (Competitive Ride/Drive & Endurance)**

Competition year ends November 31.

All results must be postmarked within 30 days from completion of event.

\$5 fee per show.

Please use a separate form for each horse.

Owner:	Rider/Driver:	Rider/Driver:									
Street Address:			Street Addre	Street Address:							
City:	: State: State: State: City: City: State:										
WPCSA Member #:	WPCSA Mem	_ WPCSA Member #:Telepho				phone:					
Age of Junior Exhibitor as of December 1st of the current competition year:											
Na	ame of Ride		C for Competitive E for Endurance	Distance (Miles)	Division Placings 1-10 or Completion (C)	Date of Ride	Points	Medallion Miles			

Pony/Cob: \_\_\_\_\_\_\_\_Registration #: \_\_\_\_\_\_



Submit to Open Competition Secretary: WPCSA, 720 Green St., Stephens City, VA 22655

Owners/Riders must be members of WPCSA.

#### **Entry Form C (Eventing)**

Competition year ends November 31.

All results must be postmarked within 30 days from completion of show.

A copy of the show prize list must be submitted for each competition reported.

Report one horse per form. Multiple events may be listed on one form.

If a horse has multiple riders, use separate sheet for each rider.

\$5 fee per show.

ony/Cob:					WPCSA Registration #:					
		Owner		Rider/Driver						
Name:				Name:						
Address:				Address:						
City:				City:						
WPCSA Memb	per #:		Phone# ( )	WPCSA Member #:	WPCSA Member #: Phone# ( )					
Age of J	unior Exhibitor as	of December 1	st of the current competi	tion year:		OFFICE	USE ONLY			
Date	Event Type*	Division**	Na	ame of Event/Location	Placing	Year End Points	Medallion Points			

<sup>\*</sup> Event Type: CT = Combined Test; HT = Horse Trials; 2D = Two-Day Event; 3D = Three-Day Event (specify CCI or CCN)

<sup>\*\*</sup> Division: BN = B. Novice; N = Novice; T = Training; P = Preliminary; I = Immediate; A = Advanced



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Owners/Drivers must be members of WPCSA.

#### **Entry Form D (Combined Driving)**

Competition year ends November 31.

All results must be postmarked within 30 days from completion of show.

A copy of the show prize list must be submitted for each competition reported.

Report one or multiple horse(s) and one show per form.

\$5 fee per show.

Horse:						Registration #:						
Horse:						Registration #:						
Horse:						Registration #:						
Horse:						Registration #:						
Owner:						Driver:						
Street Address:						_Street Address:						
City: State: Zip:					City: State: Zip:							
WPCSA Member #: Telephone:			2:		_ WPCSA Member #:	Telephone:						
Age of Junio	r Exhibitor as o	of December 1	st of the cur	rent competitic	on year:	_		OFFICE U	JSE ONLY			
Event Type*	Division**	Phase		Horses***		Placing	Year End Points	Medallion Points				
		Dressage										
		Marathon										
		Cones										
		Overall										
		<u> </u>										

<sup>\*</sup>Event Type: AT = Arena Trial; CT = Combined Test; DT = Driving Trial; 2CDE = Two-Day Combined Driving Event: 3CDE = Three-Day Combined Driving Event

<sup>\*\*</sup> Division: T = Training; P = Preliminary; I = Immediate; A = Advanced

<sup>\*\*\*</sup> Horses: For pair/multiple entries only



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Pony/Cob:

### **Entry Form E (Dressage)**

Competition year ends November 31.

#### All results must be postmarked within 30 days from completion of show.

\_Registration #: \_\_\_\_\_\_

Please include a copy of the cover page from each test. If a horse has multiple riders, use separate sheet for each rider.

Owner:				Rider:	Rider:					
Street Address	:			Street Ad	Street Address:					
City: State: Zip:				City:		State:	Zip:			
VPCSA Member #:Telephone:					ember #:	Telephone	:			
Age of Junior Exhibitor as of December 1st of the current competition year:							OFFICE USE ONLY			
Class Type*	Test	Name and [	Date of Event		Judge	Score	Medallion Points			

<sup>\*</sup> Class Type: BD = Beginner Dressage; T = Training; 1L = First Level; 2L = Second Level; 3L = Third Level; 4L = Fourth Level; PSG = Prix St. Georges; I1 = Intermediare I; I2 = Intermediare II; GP = Grand Prix



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#### **Entry Form F (Working Western)**

Competition year ends November 31.

All results must be postmarked within 30 days from completion of show.

A copy of the show prize list must be submitted for each competition reported.

Report one horse and one show/event per form. \$5 fee per show.

If a horse has multiple riders/drivers, use separate sheet for each rider/driver.

Name & Ado	dress of Show Secre	tary:							
Owner: Rider/Driver:									
Street Address:Street Address:									
City: State: Zip:					ity:	Stat	ate: Zip:		
WPCSA Mer	mber #:	Telephone:		W	PSCA Member	·#:	Telepl	hone:	
Age of Junior Exhibitor as of December 1st of the current competition year:							OFFICE USE ONLY		
Class Type*		Name of Class		Sanctioning Body**	Class #	Placing	# of Entries	Year End Points	Medallion Points

Name of Show: \_\_\_\_\_\_ Date(s) of Show: \_\_\_\_\_

<sup>\*</sup> Class Type: S = Sanctioned; US = Unsanctioned

<sup>\*\*</sup> Sanctioning Body: NRHA; NRCHA; NCHA; USTPA; CMSA; ACTRA; Other (please state name): \_\_\_\_\_\_