



COMPETITIONS PROTESTING MEASUREMENT FORM

PLEASE PRINT

Name of Animal: _____ Recording #: _____

Year Foaled: _____ Sex: _____ Colour: _____

Markings: _____

Shod _____

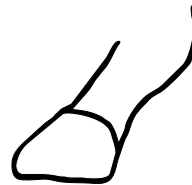
Give height from coronet to ground

Plates _____

_____ TOE

Flat _____

With Heels _____



_____ HEEL

Unshod _____

Division: _____

THIS IS TO CERTIFY THAT THE ANIMAL DESCRIBED HEREIN HAS BEEN OFFICIALLY RE-MEASURED ACCORDING TO A1112 AND G111. THIS FORM IS TO BE SENT IMMEDIATELY TO EC WITH ONE COPY TO THE OWNER.

_____ H.H. at the _____
(name of competition)

Signed this _____ day of _____.

First Measuring Officer: _____

Please Print Name: _____

Second Measuring Officer: _____

Please Print Name: _____

Name of Owner: _____ EC #: _____

Address/Adresse: _____

STEWARDS: Please forward one (1) copy to Equestrian Canada competitions@equestrian.ca within 10 days.
Please provide one (1) copy to the owner of the pony. Valid for 10 days post competition.