

## USDF Region 9 Young Rider Information

PLEASE PRINT legibly, fill in as much as you can, attach more paper for long answers if you like !

E-mail to [ginni@flash.net](mailto:ginni@flash.net) or [cboyd@txcyber.com](mailto:cboyd@txcyber.com) or

mail to Michele Voorhees, 6809 Stousland Rd., College Station, TX 77845

Questions ? Use e-mail or call Michele at 979-690-6788

**Rider Name** \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

E-Mail \_\_\_\_\_

Phone Home \_\_\_\_\_ Phone Cell \_\_\_\_\_

USDF Member # \_\_\_\_\_ Participating and/or Group member? (circle) \_\_\_\_\_

USEF (AHSA) Member # \_\_\_\_\_

Group Member Organization (GMO; ex CTDS,HDS) to which you belong \_\_\_\_\_

**Parent Name(s)** \_\_\_\_\_

Address \_\_\_\_\_

e-mail \_\_\_\_\_

Phone Home \_\_\_\_\_ Phone Cell \_\_\_\_\_

**Horse Registered Name** \_\_\_\_\_ Barn Name \_\_\_\_\_

Age \_\_\_\_\_ Ht \_\_\_\_\_ Color \_\_\_\_\_ Breed \_\_\_\_\_ Gender \_\_\_\_\_

USDF Registration # \_\_\_\_\_ USEF (AHSA) Recording # \_\_\_\_\_

Highest Level Successfully (53% or more)Competed : Rider \_\_\_\_\_ This Horse \_\_\_\_\_

\_\_\_\_\_ This Horse/Rider Combination \_\_\_\_\_

### Rider :

Do you have an instructor from whom you take regularly scheduled lessons? If so, provide name, address, phn, e-mail:

Have you participated in Dressage Clinics with visiting clinicians ? If so, provide name(s), how often, when :

What are your specific goals for Dressage : (ex : fun; NAYRC, Olympics, become a trainer)

What is your opinion of the potential level you and this horse can attain ? How long to get there ?

What else should we know of your accomplishments, plans, skills, etc. ?