

CDS SHOW REPORT COVER SHEET

CDS CHAPTERS
MUST FILE
PAY SHEET
TAX REPORT FORM
INDEPENDENT
CONTRACTOR
FORM WITH SHOW
RESULTS

SHOW NAME _____

SHOW DATE _____

JUDGE _____

LOCATION (TOWN) _____

SHOW SECRETARY _____ PHONE _____

CDS# _____

SHOW MANAGER _____ PHONE _____

CDS# _____

TECHNICAL DELEGATE _____

EMT _____ PHONE _____

CDS HIGH SCORE PONY _____

rider / pony / class #/ score

Pony must have USEF measurement card, temporary or permanent.

Must **INCLUDE** copy of measurement card with results

FEES:

LICENSE FEE \$ _____

(\$3.00 required from each entry. 1 horse equals 1 entry.)

NUMBER OF HORSES IN THE SHOW _____

NON-MEMBER FEE AMOUNT \$ _____

(\$25.00 required for each non-member, RIDER AND OWNER)- **CDS ONLY** rated shows

Show reports **MUST** include **BY CLASS** on one page:

All classes and all rides, scratches and no-shows

CLASS / JUDGE

HORSE

RIDER (full name)

RIDER CDS number

OWNER

OWNER CDS number

RAW SCORE

PERCENTAGE to three decimals

PLACE

Scores will not count
unless the
Rider **AND** the Owner
are CDS Members

SEND TO
CDS CENTRAL OFFICE
P O BOX 417
CARMEL VALLEY, CA 93924