



CADORA INC AWARDS PROGRAMME SCORE REPORT FORM

LEVEL / DIVISION RIDDEN: _____

DATE OF SHOW	NAME OF SHOW	PROVINCE	JUDGE(S)	%
			TOTAL PERCENTAGES (each: 60% minimum)	
			AVERAGE % (Divide by 3)	

RIDER INFORMATION

NAME: _____ EMAIL ADDRESS: _____
 MAILING ADDRESS: _____ PROVINCE: _____ POSTAL CODE: _____
 PHONE: _____ CADORA GROUP: _____ CADORA INC #: _____

HORSE INFORMATION

NAME OF HORSE: _____ EC PASSPORT #: _____

OWNER INFORMATION

NAME OF OWNER: _____ EMAIL ADDRESS: _____
 MAILING ADDRESS: _____ PROVINCE: _____ POSTAL CODE: _____
 PHONE: _____ CADORA GROUP: _____ CADORA INC #: _____

- Copies of your dressage tests (as indicated above) must be included with this report form, or it will be considered invalid.
- All riders and owners must be members of Cadora INC no later than July 1st of the current year in order to be eligible for these awards.

**Mail this form (and test copies) no later than December 1st to:
 Claire Vessey, 3498 Maureen Terrace, Victoria, BC, V9C 3P7**

FOR COMPLETE INFORMATION ON THE CADORA INC YEAR-END AWARDS PROGRAMME, PLEASE SEE
 THE CURRENT EDITION OF THE CADORA INC OMNIBUS OR GO TO www.cadora.ca.