



Clydesdale Cross Sport Horse Association

Performance Award Registration

Horses Name:
CCSHA Registration No:

CCSHA Registration No:

CCSHA Members Name:

Horses Age: Horses Sex:

CCSHA Members Address:

Contact Phone Number:
Email Contact:

Commencement Date:

Completion Date:

Office Use Only:

Date of Event:	Event Name:	Attendance Points:	Total Points:	Office Use:
	Organising Club:	Certification Signature:	Placing Points:	Accumulated Points Total:
	Phone:			

Date of Event:	Event Name:	Attendance Points:	Total Points:	Office Use:
	Organising Club:	Certification Signature:	Placing Points:	Accumulated Points Total:
	Phone:			

Date of Event:	Event Name:	Attendance Points:	Total Points:	Office Use:
	Organising Club:	Certification Signature:	Placing Points:	Accumulated Points Total:
	Phone:			

Date of Event:	Event Name:	Attendance Points:	Total Points:	Office Use:
	Organising Club:	Certification Signature:	Placing Points:	Accumulated Points Total:
	Phone:			

Date of Event:	Event Name:	Attendance Points:	Total Points:	Office Use:
	Organising Club:	Certification Signature:	Placing Points:	Accumulated Points Total:
	Phone:			

Date of Event:	Event Name:	Attendance Points:	Total Points:	Office Use:
	Organising Club:	Certification Signature:	Placing Points:	Accumulated Points Total:
	Phone:			

Date of Event:	Event Name:	Attendance Points:	Total Points:	Office Use:
	Organising Club:	Certification Signature:	Placing Points:	Accumulated Points Total:
	Phone:			

Date of Event:	Event Name:	Attendance Points:	Total Points:	Office Use:
	Organising Club:	Certification Signature:	Placing Points:	Accumulated Points Total:
	Phone:			

Please Specify if CCSHA, State or National Titles Apply to Individual Events.

Signed:.....

Date:.....