



**ARABIAN HORSE ASSOCIATION<sup>SM</sup>**

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**REGIONAL YOUTH TEAM TOURNAMENT OFFICIAL WINNERS REPORT FORM**

1. Regional Youth Team Tournament Secretary complete all portions of this form and mail to AHA on or before December 15th of the current year.
2. Please print clearly.

**TEAM INFORMATION**

Section (check one):                     AHA Recognized Events                     Non-AHA Recognized Events

Region Represented \_\_\_\_\_ Name of Club Represented \_\_\_\_\_

Team Name \_\_\_\_\_

Name of Coach \_\_\_\_\_ Telephone # \_\_\_\_\_

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

City \_\_\_\_\_ State/Prov. \_\_\_\_\_ Zip/Postal \_\_\_\_\_

**RESULTS**

	SHOW DATE	SHOW NAME / REGION	TEAM POINTS Top Four Shows
1.			
2.			
3.			
4.			
<b>Total Points</b>			

Regional Youth Team Tournament Secretary Signature \_\_\_\_\_ Date \_\_\_\_\_  
 (Not Coach or Rider)