Youth & Mid-Summer Nationals 2024 Verification of Qualifications Please use one form per horse Per Participating Show

This form is <u>NOT</u> for adding classes – Please use the Entry Form.

This form must be completed ONLY if you qualify after MAY 28, 2024

Please refer to the current AHA handbook for detailed qualification information.

A Regional Top 5 automatically qualifies for Nationals.

FOR HORSE ENTERING MORE THAN ONE CLASS PLEASE WRITE SAME FOR HORSE/RIDER AND OWNER INFORMATION

| Name of Horse | Reg # | |
|------------------------------------|--------------------|-----------------------|
| Name of Owner | AHA# | |
| Qualifying for Class# & Title | · | |
| Rider in above class | Riders AHA # | |
| Name of Participating Show | Show Date MM/DD/YY | Show AHA recognition# |
| Participated in Class # & Title | l IF | REGIONALS PLACING |
| Name of Horse | Reg# | |
| Name of Owner | AHA# | |
| Qualifying for Class# & Title | | |
| Rider in above class | Riders AHA # | |
| Name of Participating Show | Show Date MM/DD/YY | Show AHA recognition# |
| Participated in Class # & Title | | IF REGIONALS PLACING |
| Name of Horse | Reg# | |
| Name of Owner | AHA# | |
| Qualifying for Class# & Title | | |
| Rider in above class | Riders AHA # | |
| Name of Participating Show | Show Date MM/DD/YY | Show AHA recognition# |
| Participated in Class # & Title | | IF REGIONALS PLACING |
| For Equitation Rider | <u>'</u> | |
| Name of Rider | Riders AHA # | |
| Name of Owner | AHA# | |
| Qualifying for Class# & Title | | |
| Name of Participating Show | Show Date MM/DD/YY | Show AHA recognition# |
| Participated in Class # & Title | l IF | REGIONALS PLACING |
| MUST BE SIGNED BY | | |
| Show Secretary | Date | |
| | | |

Email Completed form to: NationalEvents@ArabianHorses.org