

Greater Wichita Area Schooling Show Championships

Qualifying Class Entry Form

Must be completed and submitted with entry form

Or

Completed (and paid) prior to going down centerline the day of the show

Show Name: _____

Show Date: _____

Show Secretary Name and Phone: _____

Qualifying Dressage Tests (circle all that apply)

Training	Test 1	Test 2	Test 3	
First	Test 1	Test 2	Test 3	
Second	Test 1	Test 2	Test 3	
Third	Test 1	Test 2	Test 3	
Fourth	Test 1	Test 2	Test 3	
Prix St George		Intermediare I	Intermediare II	Grand Prix
Quadrille		PasdeDeux	Freestyle	

Qualifying Eventing Classes (circle all that apply)

Starter Beginner Novice Novice Training Preliminary

Horse Name: _____

Rider Name: _____

Rider Date of Birth (if turning 18 or younger in qualifying year): _____

Total Paid (\$5.00 per Qualifying Ride) : _____

For Office Use Only:

Amount Paid: _____

Check # _____ or Cash _____

Qualifying Scores Earned: _____ Judge: _____

Level/Test: _____ Score: _____

Level/Test: _____ Score: _____

FILL OUT FORM, PRINT AND THEN ATTACH TO YOUR COMPLETED ENTRY FORM

[Click here to return to Entry Forms Page and choose show you wish to enter](#)