American Horse Trials Foundation, Inc.

EVENT ELIGIBILITY STATEMENT

Event Name	2:			
Address:				
Organizer's	Name:			
Address:				
Telephone:	Home		Fax	
-				
Date Organi				
_				
Event Goal:	Ü			
sa Pa le 2. T 3. A	itisfactio aragraph vel com wo lette	n of the eligibility cr n 1); or a letter demor petition (<u>See</u> Event Gra rs of endorsement fror	riteria (<u>See</u> nstrating the ant Guidelin m at least tw	ne Event and the Event's basic Event Grant Guidelines, Page 1, e Event's commitment to national les, Page 1, Paragraph 2). To Active Riders. Idule and estimated twelve month
I have receiv	ved and	read the Event Grant (Guidelines.	
			Signati	ure
			Title	