



Dressage Technical Delegate Verification of Officiating



Name _____ USDF Member # _____ USEF Member # _____

Birthdate _____ Phone # _____ Email _____

Address _____

Number and Street
City
State
Zip Code

I certify that I have officiated in the capacity as a “r” Dressage Technical Delegate at the following Federation licensed open dressage competitions:

No.	Competition Recognition Number	Competition Name	Date of Competition	Competition Manager
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
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10.				
11.				

12.				
13.				
14.				
15.				

Signature of Applicant _____

Date _____