



PARA-EQUESTRIAN DRESSAGE PROGRAM STRUCTURE AND PATHWAYS

DIVISION (Please check one) ELITE _____ PRE-ELITE _____ DEVELOPING: _____
EMERGING: _____

RIDER

Name: _____
First Last USEF #

Date of Birth: _____

Address: _____
Street Address City/State/ZIP

Cell Phone: _____ Fax: _____

Email Address: _____
Is email a reliable way to reach you? Yes No

HORSES (Athlete/Horse Combination Required for Elite, Pre-Elite and Developing Divisions)

Horse I USEF# _____ Horse Owner (1) Name _____

Horse II _____ Horse Owner (2) Name _____

Email _____

Coach Name _____ Coach Contact _____ Phone: _____

BINDING AGREEMENT (The rider is required to sign the following Agreement.)

I have read and understand the Para-Equestrian Dressage Program Structure and Pathway plan and requirements for each Division. I have completed the application and submitted required scores for the Division in which I am applying. By providing my handwritten or electronic signature below, I acknowledge the aforementioned and agree to accept my role and responsibilities as a participant in the Para-Equestrian Dressage Program Structure and Pathway.

Rider Electronic Signature – Type Rider Name

Rider Email Address

Parent Electronic Signature – If Rider is a minor

Parent 1 Email Address

In order to be considered for the Para-Equestrian Dressage Program Structure and Pathway, an **Application** must be completed and submitted to USEF along with qualifying scores for the Division for which I am applying. Applicants will receive confirmation of receipt.

If you have any questions regarding the program, please contact Laureen Johnson at lkjohnson@usef.org or 859-225-7693.

Please return completed application and applicable scores, if any, to Laureen Johnson, Director of Para-Equestrian lkjohnson@usef.org.