

Area VI Young Rider Advancement Program YRAP

2018 Participation form

Rider name : USEA #

Horses name: USEA #

Current Eventing Level : I B N N T P

Email: Trainer e mail: parent e mail:

Text # Text # Text #

Mailing Address: Street

City

Zip Code

Phone #

Returning YRAP member? Yes No, new to program

Signature: Parent Signature:

Please print / E mail this form and send to: Chris McNabb YRAP Director

7920 Suzuki Lane

Christwinpalms@gmail.com

Loomis CA , 95

