

SHOW INFORMATION:

Name of WPR Approved Event: _____

Date(s) _____

State/ Province/ Country _____



WORLD PARA REINING
SHOW ENTRY FORM

RIDER INFORMATION:

Name of Rider _____

Address _____

Country of Citizenship _____

Birth Date _____

Has this rider been previously assigned a "Grade" by the FEI in any Para discipline?

If so, what was that designated Grade? _____

If not, does this rider have a physical disability verifiable by a licensed physician?
