

AMERICAN MORGAN HORSE ASSOCIATION
YOUTH OF THE YEAR
CITRUS CUP REGIONAL
REGISTRATION FORM 2016

Name: _____

Age: _____

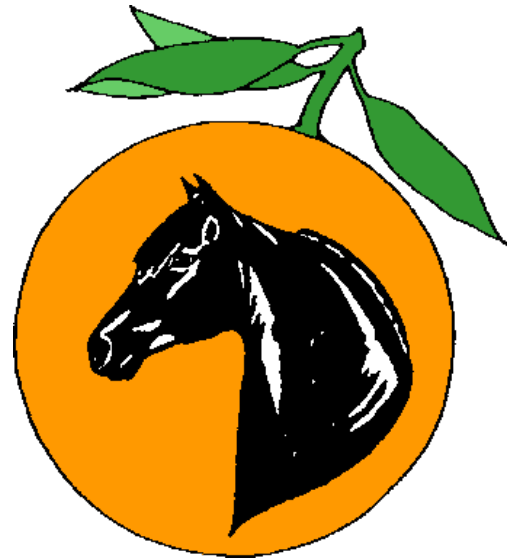
Email Address: _____

Mailing Address: _____

City _____ State _____ Zip _____

Parent/Guardian Name: _____

Parent Guardian Phone Number: _____



Divisions to be competing in *(please check appropriate age group and divisions)*:

Senior Division (14-21)

- 1. Horsemanship Pattern__
- 2. Judging__
- 3. Written Exam__
- 4. Oral Presentation__

Junior Division (13 & under)

- 1. Horsemanship Pattern__
- 2. Judging__
- 3. Written Exam__
- 4. Oral Presentation__

2016 Speech Topic

(for both Senior and Junior Divisions):

You are Setting up a therapeutic riding center, the grant you are writing for asked the following:

"What breed of horse you are using (preferably the Morgan horse) for the program and why?"

Some questions to address: what population people in are you helping in your program, i.e. what type of disabilities do they have, what is there age group you are assisting and how large of a program do you plan of having?

Time Schedule:

Judging Contest:	TBD
Speech:	Thursday, April 7, 5:00 P.M. In the Meeting Hall (Time allowed is Three to Five minutes)
Patterns:	Friday, April 8, 5:00 P.M. – 6:00 P.M. in the arena
Written Exam:	Friday April 8, 8:00 A.M. <i>and</i> Saturday April 9, 1:00 P.M.

CONTACT INFORMATION and DEADLINE FOR REGISTRATION:

Ms. Rebecca Watters Contact information:

Email(preferred): rwatters216@gmail.com

Number: 727.422.0749

Please email Ms. Rebecca Watters at rwatters216@gmail.com with the registration form and information.

Please remember that the deadline for registration is **MARCH 24, 2016.**

Your entry fee of \$10.00 may be paid at the show.