

Novice Eligibility Assessment

Phone: (254) 898-0906

kyla@americanstockhorse.org

www.americanstockhorse.org

Riders Name:	ASHA #:
Event:	ASHA #:
Head Clinician Name:	ASHA #:
Event Manager Name:	ASHA #:
COMMENTS:	
PLEASURE:	
TRAIL:	
REINING:	
COWHORSE:	
Novice Eligibility	
 It is our determination this rider is Novice Eligible It is our determination this rider is NOT Novice Eligible 	☐ YES ☐ NO ☐ YES ☐ NO
Lead Clinician Signature:	Date: