



HORSE/PONY MEASUREMENT FORM

HARFORD HORSE SHOWS ASSOCIATION

This form is to be completed for horses and ponies requiring measurement cards. Measurements are solely for the internal use of HHSA, it's competitions and it's officials in connection with competing for prizes, and do not constitute any representation or warranty regarding measurement information; accordingly, HHSA, it's competitions and it's officials make no representation and shall have no liability whatsoever for measurement errors. **A horse/pony must also be recorded for points to count.**

THIS SECTION TO BE COMPLETED BY INDIVIDUAL PRESENTING ANIMAL TO BE MEASURED

Horse/Pony Name: _____ Yr. Foaled: _____

Owner's Name: _____ Owner's Phone: _____

Owner's Address: _____

City: _____ State: _____ Zip: _____

Name & Title of Person Providing Information: _____

(Please print - must be 18 years of age or older)

CHECK ONE: Owner Parent Trainer Other _____

Signature: _____ Date: _____

Address if different from Owner: _____

THIS SECTION TO BE COMPLETED BY STEWARD AND HHSA MEASURING COMMITTEE ONLY

Date of Measurement: ___ / ___ / ___ Name of Competition & Location: _____

PURPOSE OF MEASUREMENT

- First measurement or re-measurement to replace expired temporary card.
- Measured for this competition only; indicate reason:
 - Owner did not have measurement card in his/her possession.
 - No suitable measuring surface was available.
 - Required HHSA officials not available.
- Protest/Appeal measurement (circle one).
- Change in shoeing status (owner must surrender previous card).

Height with shoes/pads: _____ Hands _____ Inches	Height of fore heels: _____ LF _____ RF
SHOEING STATUS	
<input type="checkbox"/> Unshod	<input type="checkbox"/> Shod only in front
<input type="checkbox"/> Shod only behind	<input type="checkbox"/> Shod all around
Animal was jogged and appears sound? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	

Horse/Pony's sex: _____ Color: _____ Breed: _____

MARKINGS (Leave no blank spaces; indicate "None" if no markings are present.)

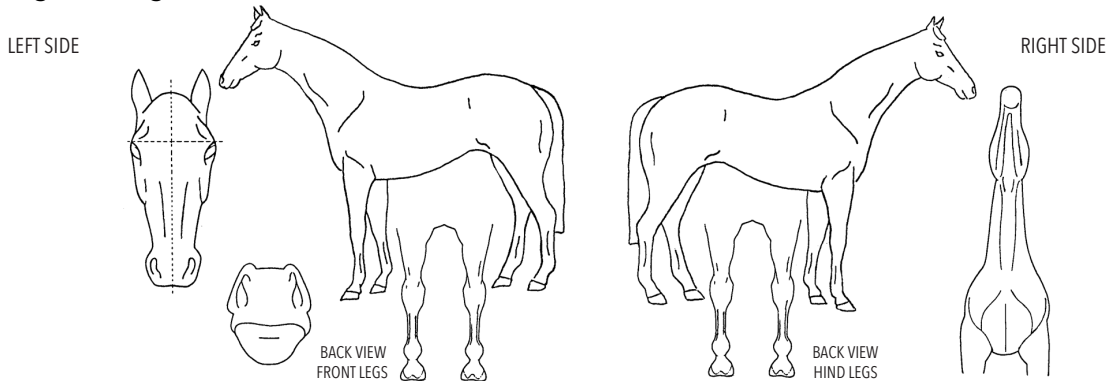
Head: _____ Cowlicks: _____

Body: _____

Leg: LF _____ RF _____

LH _____ RH _____

Draw markings on diagram and indicate location of cowlicks (hair whorls) with an "x".



I hereby certify that I have examined the horse/pony described above and the information provided above is true and correct.

PRINT NAME: _____

SIGNATURE: _____

DATE: ___ / ___ / ___ TITLE: _____

I hereby certify that I have examined the horse/pony described above and the information provided above is true and correct.

PRINT NAME: _____

SIGNATURE: _____

DATE: ___ / ___ / ___ TITLE: _____