



MFTHBA

Versatility Circuit Championship Participant Application

Name: _____

Address: _____

Date of Birth: _____

MFTHBA Membership Number: _____

MFTHBA Amateur Number (If applicable): _____

MFTHBA Professional Number (If applicable): _____

Name of Horse: _____

MFTHBA Registration Number: _____

Versatility Circuit Competition Category:

Versatility Circuit Name: _____

Open

Amateur

Youth

I certify that I have read and understand the MFTHBA Versatility Circuit Rules and Regulations, and that I will comply with these and the MFTHBA Rules, Standards and Policies.

Signed: _____

Date: _____

MFTHBA

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