FHANA ROYAL FRIESIAN BY KFPS
FRIESIAN HORSE ASSOCIATION OF NORTH AMERICA

FHANA Performance Riding Award

Owner of Horse: _____

Address: _____

City/State/Province: _____

Postal Code: _____ Email: _____

Home Phone: _____ Business: _____

Horse's Show Name: _____

FHANA/KFPS REG Name & Number: _____

Name of Rider: _____

Competition Year: _____

Each competition year will include results from January 1st to November 30th of that year.

Date	Show	Class	Show Points	Placing Points	Number in Class	**Total Points**

I hereby certify that these results/placings are valid as submitted.

Signed: _____ Date: _____

4037 Iron Works Parkway, Suite 160, Lexington, KY 40511-8483
(859) 455-7430 (telephone) (859) 455-7457 (facsimile)