

CRHA OPEN SHOW POINT PROGRAM EXHIBITOR'S REPORT



Toni Lukavich, P. O. Box 44 North Washington, PA 16048
Keeper2887@zoominternet.net

EXHIBITOR'S NAME				MEMBERSHIP#					
RANGERBRED'S NAMEADDRESS				REGISTRATION#					
	ONE								
	(NAME & ADDRES								
NAME OF EVENT				DATE OF EVENT					
	TATE OF EVENT _								
	G ORGANIZATION								
Please incl	lude a copy of the sho ase use a separate sh	owbill with th	is report. Re	eports are to	be mailed w	vithin ten (1	.0) days of the eve		
Class #	Name of Class				Placing		No. Entries	Office use onl	
	y certify that the hors hese placings if reque				e at the listed	l event. The	show secretary ki	ndly agrees	
· ·	cretary Signature	•					Date		
	name of Secretary								
	r's Signature						 Date		
	ards are earned in you	ıth only class	es, youth ric	ders earn on	en points in o			e kent	
	from open classes, ir	•	• •	•	•	•			
	# in Class	1.0+	254	2 rd	4th	T+b	C+b	_	
	1-2	1st 1/2	2nd	3rd -	4111	5th	6th -	_	
	3-5	1	1/2	_	-	_	-	\dashv	
	6-9	2	1	1/2	-	-	-	7	
	10-15	3	2	1	1/2	-	-	7	
	16.20	1	2	2	1	1/2			

21+

1/2