

YOUTH OF THE YEAR CONTEST REPORT



Name of Youth of the Year Contest _____

Chairperson of the Contest _____

Date(s) held _____

Judge(s) of the Contest _____

SENIOR DIVISION (14-21)

Number of Entries _____

Divisions Held — Please Check

- 1. Horsemastership
- 2. Judging
- 3. Written Test
- 4. Oral Presentation (state topic)

JUNIOR DIVISION (13 & Under)

Number of Entries _____

Divisions Held — Please Check

- 1. Horsemastership
- 2. Judging
- 3. Written Test
- 4. Oral Presentation (state topic)

WALK/TROT DIVISION *(12 & Under)

Number of Entries _____

Divisions Held — Please Check

- 1. Horsemastership
- 2. Judging
- 3. Written Test
- 4. Oral Presentation (state topic)

Winner's Name _____

Street Address _____

City _____

State _____ Zip _____

Telephone (_____) _____

E-mail _____

Winner's Name _____

Street Address _____

City _____

State _____ Zip _____

Telephone (_____) _____

E-mail _____

Winner's Name _____

Street Address _____

City _____

State _____ Zip _____

Telephone (_____) _____

E-mail _____

Runner-Up's Name _____

Street Address _____

City _____

State _____ Zip _____

Telephone (_____) _____

E-mail _____

Runner-Up's Name _____

Street Address _____

City _____

State _____ Zip _____

Telephone (_____) _____

E-mail _____

Runner-Up's Name _____

Street Address _____

City _____

State _____ Zip _____

Telephone (_____) _____

E-mail _____

* Other restrictions apply. Please refer to the AMHA Youth of the Year Planbook for guidelines.

If your contest had at least 3 SENIOR contestants:

Will the winner of the contest compete in the Youth of the Year Finals to be held at the Grand National & World Championship Horse Show? _____

If not, will the runner-up be entering the Finals? _____

Please note that youth members who win a Youth of the Year Contest held after September 1st have the option of competing in the Finals in either the same year or the following year, providing the age requirement is met.

Please list the names & addresses of the other SENIOR contestants:

3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Please note: If your senior division had 10 contestants, both your Winner and Runner-Up qualify to compete in the Youth of the Year Finals at the Grand National, provided all other requirements are met.

Please list the names & address of the other JUNIOR contestants:

3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Please list the names & address of the other WALK/TROT contestants:

3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Signed by _____ Title _____

Street Address _____

City _____ State _____ Zip _____

Telephone Number (_____) _____ E-mail _____

Please send this completed form to:

American Morgan Horse Association Youth | 4066 Shelburne Road, Suite 5 | Shelburne, Vermont | 05482-6908
T 802 985 4944 | F 802 985 8897 | into@morganhorse.com | www.morganhorse.com