



HHAA AWARDS DECLARATION FORM
National/International Awards

For Calendar Year of _____

Owner/Lessee Name (Either or both must be an HHAA member):

Owner Phone: _____

Owner Email: _____

Owner Mailing Address: _____

Horse's Registered Name: _____

Reg #: _____

Horse's Show Name (if different): _____

Rider/Handler Name (if not owner/lessee): _____

***Please check the Discipline (s)/Affiliated Organization(s) that you are competing in below.
Write in the division(s)/level(s)/class(s) that you compete in.***

- () **COMBINED DRIVING:** American Driving Society _____
- () **DRESSAGE:** United States Dressage Federation _____
- () **ENDURANCE:** American Endurance Ride Conference _____
- () **EVENTING:** United States Eventing Association _____
- () **JUMPING:** United States Hunter Jumper Association _____
- () **PARA-EQUESTRIAN:** United States Para- Equestrian Association _____
- () **REINING:** USA Reining _____
- () **HUNTER:** United States Hunter Jumper Association _____
- () **HUNT/JUMPING SEAT EQUITATION:** United States Hunter Jumper Association _____
- () **WESTERN DRESSAGE:** Western Dressage Association of America _____
- () **NATIONAL DRESSAGE PONY CUP** _____
- () **EQUESTRIAN CANADA** _____

After you have completed this form, please mail or email it to HHAA's National/International Awards Coordinator by November 1st of the calendar year:

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7305 Ohop Valley Road E
Eatonville, WA 98328
360-832-3885
ovhhf@yahoo.com