

# **Youth Participation Activity Record**

**Mail to MFTHBA PO Box 1027 Ava, MO 65608 (ATTN: Youth Committee) or email to**

**[mfthbya@gmail.com](mailto:mfthbya@gmail.com)**

Name: \_\_\_\_\_ Membership Number: \_\_\_\_\_

MFTHBA Horse Name: \_\_\_\_\_

Horse Registration Number: \_\_\_\_\_

Event Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Event Date: \_\_\_\_\_

Event Organizer Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Event Description (Include Flyer or Class Schedule from Event):

Class numbers and Placings:

**Youth Signature:** \_\_\_\_\_

**Event Representative Signature:** \_\_\_\_\_

**Parent/ Guardian Signature:** \_\_\_\_\_