

Oregon Region Ratings Information

Date of rating _____ Club _____

DC or Designee _____

Levels to be tested and how many at each level:

D1 _____ D2 _____ D3 _____ C1 _____ C2 _____

Please tell us about the facility which you are using:

Name and Location Cost of Facility	
Flatwork	
Stadium	
Cross Country	
Longeing	
HM Discussions	
Bathrooms	
Stabling	

Who are your examiners?

PIP _____ Second _____

Do you have an impartial observer? _____

Any apprentice examiners? _____

Please tell us how the examiner list worked with your search _____

Please return to: Michele Stevens, 400 Marylhurst Dr., West Linn, OR 97068, rosemont@spiritone.com