

**SmallestHorse Group
Standard Of Excellence
Activity Report**

Name of Horse: _____

Owner and Farm Name: _____

Owner Address: _____

Email: _____ Phone: (_____) _____

Amateur/Trainer/Youth Name: _____

Type of Activity: _____

Date: _____ Location: _____

Show Classes

Class Name: _____ Placing: _____

Class Name: _____ Placing: _____

Class Name: _____ Placing: _____

Class Name: _____ Placing: _____

Please list only one activity per sheet. (Exception same horse shown by same person at the same show)
Please submit form within 30 days of activity. Make a copy for your records.
For shows add more lines if needed.

Owner Signature: _____ Date: _____

Mail this form to: Dona Neargarder, 5120 State Route #589, Fletcher, OH 45326

www.smallesthorse.com