



EVIDENCE OF BLOOD REPORT

To be attached to the Judge/Technical Delegate Report as required. Please use a separate form for each instance to report.

Rider's Name: _____ WECan Membership # _____

Rider's Phone # _____ Rider's E-mail: _____

Horse's Name: _____ WECan Recording # _____

Horse Owner's Name: _____ Phone #: _____

Horse Owner's Email: _____

Was the competitor? Disqualified Eliminated

DESCRIBE INCIDENT/CIRCUMSTANCES: use more pages as needed

Competition Name: _____

Submitted by: _____ Date: _____

(Judge or TD)