SW Region BYRDS Progress Chart

Date DD/MM/YY .....
Rider Name .....
Email address .....
Contact No's: .....
Address: .....
.....
Post Code: .....

British Dressage South West Region

BD Membership No (if applicable): .....Height of Horse / Pony .....
Please state your 1st and 2nd choice for team consideration: .....

Name of regular trainer/s	Approximately how many lessons per month?	Comments:

Results

Date	Horse/Pony	Venue	Judge/s	Class & Test Number	%	Place	Comments