



COMPETITIVE RIDE VET SHEET

Post Ride
Vet Time

Sections 1-3 to be completed in BALL POINT PEN ONLY by rider before collecting number bib from Secretary

1	RIDE NAME					DATE	
2	CLASS NUMBER		DISTANCE			RIDER NUMBER	
3	HORSE					EMERG. CONTACT AT VENUE (PHONE)	
	BREED		AGE		COLOUR	NO. PLATE OF CREW CAR	
	RIDER				D.O.B	BRANCH	

PLEASE TAKE TO VET FOR 1st VET INSPECTION

VET INSPECTION	SHOE	PULSE	ACTION	PASS/FAIL	TACK CHECK			
1st INSPECTION								
2nd INSPECTION								
FINAL INSPECTION								
COMMENTS (IF NEEDED)					FINISH TIME			
					START TIME			
					TIME TAKEN			
HOLD TIME (IF ANY)								
RIDING TIME								
AVERAGE SPEED								
IF ELIMINATED OR RETIRED, STATE REASON HERE AND THEN STRIKE THE SHEET RIGHT THROUGH					FIT TO TRAVEL (ONLY IF ELIMINATED OR RETIRED)			
PASS/FAIL		AWARDS			POINTS			