Jumping Certification Turn in to the Extension Office by Fair Entry Deadline

Your selected evaluator/rater may require compensation for performing this certification.

Rider's N	Vame:		Phone:	
Address:			Date:	
	City	State	Zip	
Horse's N	Name:			
(Parei	nt or Guardian Signo	certify that this m ature) ELY be evaluated by the instru-	nember <u>and</u> horse have received previous jump ctor.	oing
Name of	Evaluator/Rater	certifying:		_
control of	f horse. Complet n over Jumps at t	tion of this certification is requi the Weld County Fair Junior Ho	ely, with good balance and proper position, and red for riders entering Hunter Hack and Engliorse Show. me horse ridden for certification**	
Jumping	ability must be sl	hown by completing the follow	ing exercises:	
1			ground approximately 4* feet apart with one 1 the last pole; circle and repeat exercise.	.8"
2			ground approximately 4* feet apart with two 2 from the last pole; circle and repeat exercise.	2-
3	right befo circle. (If	re and after a jump, at least 2 li	ps, including an entry circle, turns both left and ness of jumps placed 60 feet apart, and an exit is jumps 60 feet apart. Rider jumps this line that to the left.)	
Required	Skills:		Score:	
1. Contro	ol of horse approa	ching jumps		
2. Contro	ol of horse after c	ompleting jumps		
3. Correc	t balance over ju	mps		
		n poles and/or jumps to fit horse		
Rate ride	r's performance i	from 1 to 10. Average of 8 requ	uired for certification.	
I hereby o	certify that I have	•	pleting the required jumping exercises, and the	at
S	Signature of Eva	luator/Rater		