

RIDE NAME \_\_\_\_\_ DATE \_\_\_\_\_ DISTANCE \_\_\_\_\_

RIDER #

Rider Name \_\_\_\_\_ Weight Division \_\_\_\_\_

Junior Rider \_\_\_\_\_ Sponsor's Name (Juniors) \_\_\_\_\_

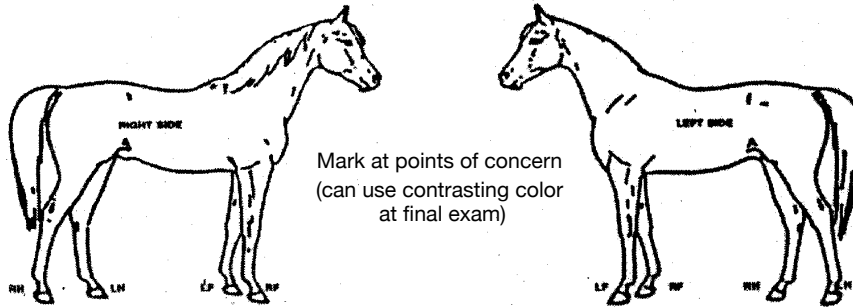
Horse Name \_\_\_\_\_ Age \_\_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_

**Body Condition Score**

(Must be between 3 & 8)

Circle Score

- 1 – Poor
- 2 – Very Thin
- 3 – Thin
- 4 – Moderately Thin
- 5 – Moderate
- 6 – Moderately Fleshy
- 7 – Fleshy
- 8 – Fat
- 9 – Extremely Fat

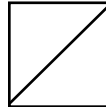


FINISH TIME: \_\_\_\_\_

**Pre-Ride (First) Examination**

P \_\_\_\_\_  
R \_\_\_\_\_  
T \_\_\_\_\_

**Post-Ride (Final) Examination**

P \_\_\_\_\_ Time \_\_\_\_\_ Cardiac  
R \_\_\_\_\_ Recovery  
T \_\_\_\_\_ Index (CRI) 

Parameter	A,B,C,D	Comments	Parameter	A,B,C,D	Comments
Mucus Membranes			Mucus Membranes		
Capillary Refill			Capillary Refill		
Jugular Refill			Jugular Refill		
Skin Tenting			Skin Tenting		
Gut Sounds Grade each quadrant			Gut Sounds Grade each quadrant		
Anal Tone			Anal Tone		
Muscle Tone			Muscle Tone		
Back Withers			Back Withers		
Tack Galls			Tack Galls		
Wounds			Wounds		
Gait			Gait		
Impulsion			Impulsion		
Attitude			Attitude		
Overall Impression			Overall Impression		

Signature of Examiner \_\_\_\_\_ Signature of Examiner \_\_\_\_\_

Reason of elimination \_\_\_\_\_ Signature \_\_\_\_\_

CHECK #/ NAME		
MILEAGE		
ARRIVAL TIME		
PR TIME		
PULSE		
OUT TIME		
Mucus Membranes		
Capillary Refill		
Jugular Refill		
Skin Tenting		
Gut Sounds Grade each quadrant		
Anal Tone		
Muscle Tone		
Back Withers		
Tack Galls		
Wounds		
Gait		
Impulsion		
Attitude		
Overall Impression		
COMMENTS		
Cardiac Recovery Index (CRI) Note time if possible		
Examiner		