



California State Horsemen's Association, Inc.
Trail Trials
State Rider Fee Remittance Form

This form must be completed and sent with one check for the total fees from your ride within 30 days. Collect a \$3.00 Trail Trials State Rider Fee on your entry form from every **competing* rider**. Schooling Riders or Companion Riders are exempt from payment of the fee but please include them below for statistical purposes in the area provided.

Ride Date:	
Region:	
Ride Manager Name:	

Total Number of Competing Riders* _____ X \$3 = \$_____ Submitted

Ck # _____ Dated _____ Check Payable to: CSHA Trail Trials

Mail To: Diane Medlock, Trail Trial Sanctioning Chair
 41929 County Road 27
 Woodland, CA 95776

Additional Ride Statistics:	
Total number of Schooling Riders (do not submit \$3 fee for these)	_____
Total number of Companion Riders (do not submit \$3 fee for these)	_____

***Competing Rider Defined:** A rider, no matter which age category or division, who is riding for placing and/or day awards in your trail trial whether they are a CSHA member or not. This number must match your Official Ride Results Form.