



FEI EVENTING STEWARD
Documentation of Experience

Competition Name: _____ USEF Competition ID Number: _____

Date: _____ Location: _____
(City, State)

This is to confirm that _____ completed the following at the above listed competition:
(Name, USEF ID)

	Total Days	Total Hours	Date
<input type="checkbox"/> Cross Country Starter	_____	_____	_____
<input type="checkbox"/> Horse Inspection	_____	_____	_____
<input type="checkbox"/> Passport Check	_____	_____	_____
<input type="checkbox"/> Stable Manager	_____	_____	_____
<input type="checkbox"/> Tack and Equipment Check	_____	_____	_____
<input type="checkbox"/> Warm Up Supervisor	_____	_____	_____
<input type="checkbox"/> Volunteer	_____	_____	_____
<input type="checkbox"/> Other _____	_____	_____	_____

Describe duties:

Name of FEI Chief Steward or USEF Eventing TD: _____

Signature of FEI Chief Steward or USEF Eventing TD: _____

Name of Competition Manager: _____

Signature of Competition Manager: _____

Date _____