

Qualification Form

Qualifying dates: September 2, 2024 - August 17, 2025

Please check <u>www.CBLM.org</u> to verify your qualification status

Only Riders who have NOT qualified will be individually notified

Email or mail this form to me as soon as the show is over, to insure that you qualify - it is YOUR responsibility to mail this form to me!! Submit a copy of the FRONT of your test (with show name/score earned/horse-rider combination) to get your form processed immediately.

You MUST submit a separate Official Show Entry form to the Show Secretary or enter

online, to enter the Champi Rider Name:	•	Email:
Jr/Yr Birthdate:	Phone #:	Rider Division*: A or B (may be changed
Horse Name:		
Address:		
City/State/Zip:		
	Qualifying Co	ompetition Information
Name of Qualifying Show:	·	Date:
Level:		Musical FS Level:
Percentage:		MFS Percentage:
PROOF OF VALID GMO ME the following ways:	CMBERSHIP You must provide	proof of GMO (please name it below) membership in ONE of
and last name or USDF numbers Enclose a copy of the address	er at https://www.usdf.org/card/ s page of the Rider's local groups	can print any Rider's membership card by searching by first s' newsletter. MO President or Membership Secretary.
* Have the Rider's GMO Presi	ident or Membership Secretary s	sign this form below.
I Am a Member of GMO name	e:	
Signature of GMO President o	r Membership Chair:	
	2025 Colonel 1	Bengt Ljungquist Memorial

Bettina Longaker, Qualifying Secretary entries@scriptsrides.com 8246 Open Gate Rd Gordonsville VA 22942 f: 540-301-8166

Entry Secretary:

Championships August 29 - 31. 2025 The Horse Park of New Jersey Allentown NJ

* Rider Division: Please read the 2025 Rules

ellen@dressageexperiencesms.com esdcta.org Rules on www.CBLM.org – your Division may be changed when you enter the Championships