

EVENTS

!!Use the attached list for DETAILS!!



ACTIVITY: (please circle) **GYMKHANA % DAY, CRD HORSE SHOW**

OTHER: (please specify)

ORGANIZER'S NAME:

ACTIVITY DATE:

EVENT INCOME:	Total Riders:	#
@ \$	Masters	\$
@ \$	Seniors	\$
@ \$	Junior A	\$
@ \$	Junior B	\$
@ \$	Junior C	\$
@ \$	Junior D	\$
@ \$	Lead Line	\$

OTHER INCOME (list details)	\$
	\$
	\$
	\$

TOTAL INCOME: \$

EXPENSES: (list details - ie: prizes, supplies)	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -

TOTAL EXPENSES: \$ -

!!Treasurer to issue the cheque for Judge or Clinician!!

TOTAL DEPOSIT: !!All receipts must be included!! \$

SUBMITTED BY:

DATE: