

VET BOX - Four-In-Hands



Name of Competition: _____ Date: _____ Veterinarian: _____

Distance: Section A _____ Section D _____ Section E _____

Weather: Temperature: _____ Humidity: _____ Precipitation: _____ Clear or Cloudy: _____

Type of roads and condition of course: _____

Type of terrain: _____

#	IN AT D			OUT AT D			FINISH AT E			COMMENTS
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