Form 4.2

VET BOX - Singles

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
	P	R	T	P	R	T	P	R	T	