



# The English Circuit of South Jersey

## Dressage Medal Application Form -- The Silver Medal

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Horse	Name of Show	Date	Test	Judge	%
			First Level Test 3		
			Second Level Test 3		

***You do not need to submit copies of any test scores earned this season***