

Brandywine Valley Driving Club Suzy Stafford Annual Cones Performance Award

Driver Name: _____ Email Address: _____

Street Address: _____ Phone: _____

City, State Zip: _____

Competition Year: _____

Each awards year may include results from
November 1st of the previous year through October 31st of the current year.

**May use up
to ten (10)
cones classes**

Show Points	
BVDC =	5
ADS rated =	4
USEF rated =	3
Opportunity/Exhibition =	2
Non-rated =	1

Placing Points	
1st =	6
2nd =	5
3rd =	4
4th =	3
5th =	2
6th =	1

Total points = show pts x placing pts x # in class pts

	Show Date	Show Name	Class Name	Horse Name	Show Pts	Placing Pts	# in Class	Total Pts
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

I heereby certify that these results/placings are valid as submitted.

Total:

Signed: _____ Date: _____

Return completed form by November 15th of the current competition year to:

Camilla Hansen via either email: mufieldhockey11@gmail.com or mailed to this address: 10 Nine Gates Road, Chadds Ford, PA 19317