



Dressage Scribing Form

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APPLICANTS INFORMATION: This form is to be completed for individuals applying for an AEF Dressage Provincial Officials Designation.

Applicants Name: _____

Street Address: _____

City: _____ Prov: _____ Postal: _____

Phone: _____ Home Cell Work

Email: _____

AEF#(required): _____

SCRIBING EXPERIENCE: Minimum of 8 hours with a Medium or higher EC Dressage Judge, during a sanctioned competition.

I have obtained the following scribing experience for a total of _____ hours.

Competition Name: _____

Levels: _____ Total Hours Scribed: _____ Date: _____

Judge: _____ Judge's Signature: _____

Competition Name: _____

Levels: _____ Total Hours Scribed: _____ Date: _____

Judge: _____ Judge's Signature: _____

Competition Name: _____

Levels: _____ Total Hours Scribed: _____ Date: _____

Judge: _____ Judge's Signature: _____

Competition Name: _____

Levels: _____ Total Hours Scribed: _____ Date: _____

Judge: _____ Judge's Signature: _____