

**West Central Light Horse Clubs
Project Identification**

Member Name _____ Phone Number _____

Club Name _____

Age of Member (As of January 1st) _____ Name of Leader _____

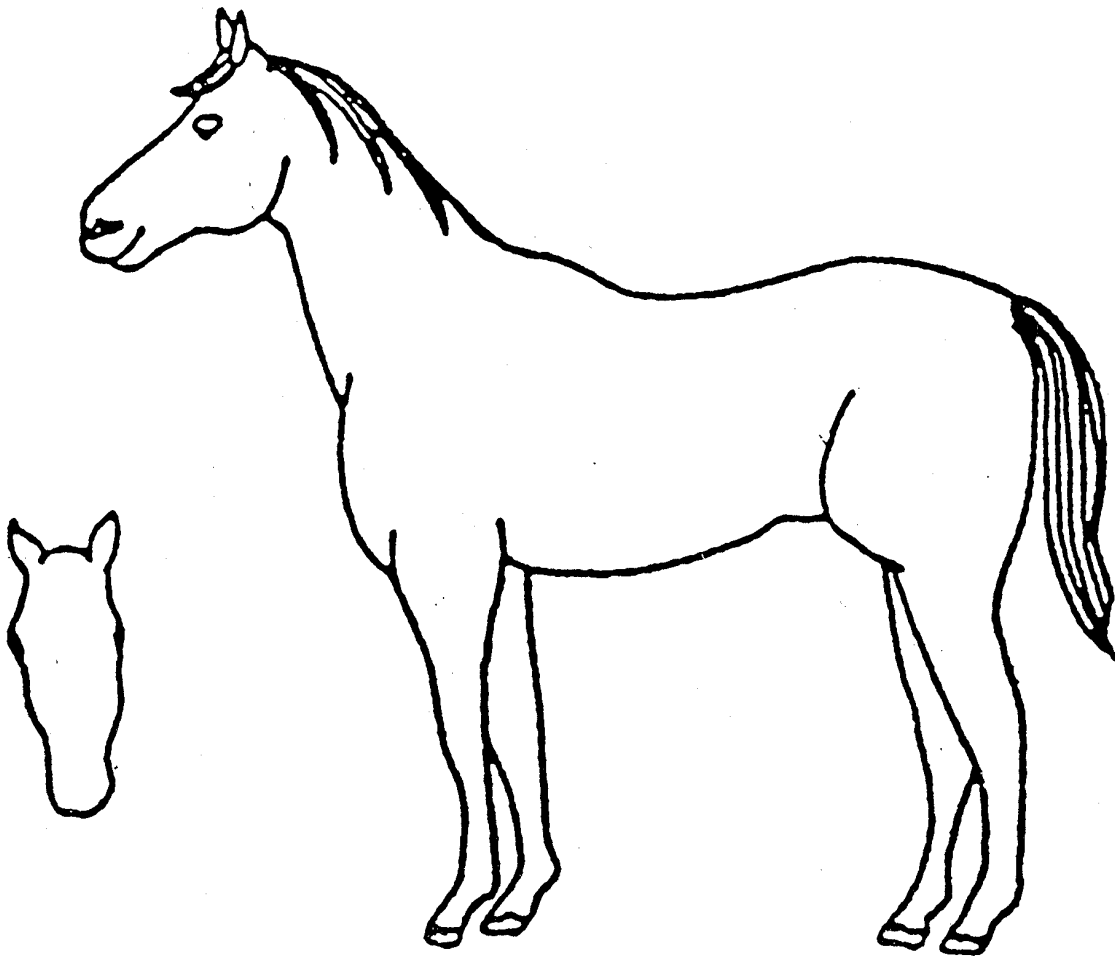
Registered Name of Horse _____

Stable Name or Nickname of Horse _____

Age of Horse _____ Sex _____ Height: Hands _____ Inches _____

Color and Markings _____

Photograph of your Project horse or Fill in appropriate color and markings
(Place Photo over Drawing)



Date Completed _____

Member Signature _____

Leader Signature _____

Please Give to your Club Leader
To Return to the Regional Horse Committee