

# ST. LAWRENCE AND OTTAWA VALLEY

## 2006 DRESSAGE DEVELOPMENT GRANT FORM

Due Date: NO LATER than OCTOBER 31,2006

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

Branch Contact: \_\_\_\_\_

Contact e-mail: \_\_\_\_\_

Event:

Event Date:  Topic:

Member's Name	\$ Paid	Notes:
<b>Total amount paid by Branch</b>		

Please complete and return to Debi Stoness for the grant payout at the end of the year. Receipts of the event MUST accompany this form. In order to qualify the clinic must be by a recognized and qualified coach.

[debi@debistonestess.com](mailto:debi@debistonestess.com)