



OTTAWA VALLEY HUNT

Youth Program

APPLICATION FORM

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

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

Telephone : \_\_\_\_\_ Other : \_\_\_\_\_

Email address : \_\_\_\_\_ Age : \_\_\_\_\_

Riding experience : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Barn affiliation (if any) : \_\_\_\_\_

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