

# CEA Application for Substitution of Equine due to Incapacitation

This application is for the substitution of an equine for the following event(s).

Name of Event: \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_

Name of Equine Being Replaced: \_\_\_\_\_

Owner: \_\_\_\_\_

Print Name of Rider/Handler: \_\_\_\_\_

Rider/Handler Signature: \_\_\_\_\_

Name of Proposed Replacement Equine: \_\_\_\_\_

Owner: \_\_\_\_\_

Owner Signature: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

At the adoption of this new policy on 9/10/2006, the Board decided that a Veterinary Certificate would not be required to prove adequate reason for a substitution. However, abuse of this privilege will necessitate reversal of this policy without notice. Permission for this substitution, if granted, will only be in effect for the single event listed above.

Return this form to the CEA at least 15 days before the competition listed above.

Chinook Equine Association  
Attn: CEA Board  
P.O. Box 981  
Boardman, OR 97818

For Official Use Only	
_____ Approved _____ Board Members Contacted _____ Initials _____ Date	_____ Disapproved _____ Board Members Contacted _____ Initials _____ Date