International Trotting & Pacing Assn, Inc.

Official Measuring Sheet

Eligibility Cert No.	Name of Horse	Age	Height / Shoes In-S Out-S In-NS Out-NS	Gait	Owner

Name of Track: _____ Date: _____

Measuring Committee Member(s) Signatures:

_____

_____

_____

Area Director Signature:

_____

Race Secretary Signature:

_____

Return completed forms to:
ITPA Office 10870 S. 600 E. North Manchester, IN 46962