

IMTCA Measurement Card



Equine Name: _____

Equine Division: _____ MINI/PONY/HORSE

Owner Name: _____ Member # _____

Measurement Date: _____

Non Member Owner Contact Info

Address: _____

Phone: _____

Email: _____

Venue Measurement taken: _____

Witnessing IMTCA Judge: _____

Owner Copy

IMTCA Measurement Card



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File Copy