



**MARICOPA COUNTY 4-H  
HORSE PROFICIENCY  
CERTIFICATE**

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

SN <input type="checkbox"/> JR <input type="checkbox"/> SR <input type="checkbox"/>	Beginner	Intermediate	Advanced Jr.	Advanced Sr.	Horse Name	Approved by
Western						
English						
Hunter Hack		18" <input type="checkbox"/>	18" <input type="checkbox"/> 2' <input type="checkbox"/>	2' <input type="checkbox"/> 2'6" <input type="checkbox"/>		*
Eq. Over Fences			2' <input type="checkbox"/>	2' <input type="checkbox"/> 2'6" <input type="checkbox"/>		*
Hunter Over Fences			2' <input type="checkbox"/>	2' <input type="checkbox"/> 2'6" <input type="checkbox"/>		*
Roping						
Gymkhana						
Ranch Sorting						
Touch Calf Roping						*
Tie Down Calf Roping						*

Signature of Club Key Leader: \_\_\_\_\_

Date: \_\_\_\_\_

\*Members in these classes must be certified by personnel and approved by the Maricopa 4-H Horse Committee to certify members for proficiency in the Maricopa County 4-H Horse Program.  
This proficiency test has been conducted according to the procedures set forth in the 2013-2015 Maricopa County 4-H Horse Rule Book



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Club Name:

Member Name:

I certify that \_\_\_\_\_ has passed the Level 1 Proficiency written test with a score of \_\_\_\_\_. I further certify that he/she has demonstrated the ability to control his/her horse and is competent to compete and/or participate in 4-H local, county, and state shows, clinics and riding sessions.

Leader Signature:

Date:

I/We, the parent(s)/Guardian(s) will not hold the University of Arizona or the 4-H program responsible for any damages or injuries caused by my/our son/daughter or the horse they are riding in any Arizona/Maricopa County event.

Parent/Guardian Signature:

Date:



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