



## **The Sorrento Memorial Amateur Rider Grant Application**

Name \_\_\_\_\_

CHJA Number \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Competition or Event for which funds are requested \_\_\_\_\_

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

Closing date to register for event: \_\_\_\_\_

Statement of why you would like to attend this competition or event and why you need financial support to attend (add additional page if needed):

Email application to [foundation@chja.org](mailto:foundation@chja.org).