



# VET BOX RECORD

## Four-In-Hands

Name of Competition: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Veterinarian: \_\_\_\_\_

Distances: Section A: \_\_\_\_\_ Walk: \_\_\_\_\_ Section B: \_\_\_\_\_

Temp Morning: \_\_\_\_\_ Humidity Morning: \_\_\_\_\_ Precipitation: Morning: \_\_\_\_\_

Mid-Day: \_\_\_\_\_ Mid-Day: \_\_\_\_\_ Mid-Day: \_\_\_\_\_

Afternoon: \_\_\_\_\_ Afternoon: \_\_\_\_\_ Afternoon: \_\_\_\_\_

Clear: \_\_\_\_\_ Cloudy: \_\_\_\_\_ Type Terrain: \_\_\_\_\_

Condition of Course: \_\_\_\_\_

		IN AFTER WALK			OUT BEFORE B			AT END OF B			COMMENTS/BREED
ENTRY #	EQUINE	PULSE	RESP.	TEMP.	PULSE	RESP.	TEMP.	PULSE	RESP.	TEMP.	
	LL										
	LW										
	RL										
	RW										
	LL										
	LW										
	RL										
	RW										
	LL										
	LW										
	RL										
	RW										