



VET BOX RECORD

Pairs/Tandem

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.	
	L										
	R										
	L										
	R										
	L										
	R										
	L										
	R										
	L										
	R										