



PCT – CROSS COUNTRY SCORESHEET

Jump No. **Grade**

Organiser’s contact.....

Steward’s Name.....

Mobile No.....

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Rider No.	Clear ✓	Refusal			Fall of rider and/or horse FR/FH	Time hh:mm:ss	Remarks (for complex comments, please use the back of this form)
		1st	2nd	3rd			
		x	x	x			

Comments

Rider No.	Comment