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United States Dressage Federation <sup>™</sup>
USDF L Education Program
Continuing Education Report Form

Name:		Year:
USDF member #:	Email:	
Address:		
City, State, Zip:		

## **CONTINUING EDUCATION INFORMATION (8 hours required)**

Program Name	Date	Number of Hours	Signature of Organizer

## USDF L EDUCATION PROGRAM CANDIDATE/GRADUATE

## **CODE OF CONDUCT**

As a member in good standing of the United States Dressage Federation (USDF) member, I acknowledge my obligation to uphold and adhere to the highest standards of horsemanship and sportsmanship.

In my role as an L Candidate or L Graduate I will place the rider's safety and horse's welfare above all other considerations.

As a candidate or graduate of the L Program, I will know and comply with all rules of USEF and USDF and honor the principles of fair play inherent in them.

I understand that as a candidate or graduate of the L Program, I serve as a representative for our sport, USDF, and the USDF L Program. I will serve as a positive example through my conduct and behavior by maintaining a professional demeanor.

I further understand that any USDF member suspended by USEF will be considered a USDF member not in good standing during the period of suspension. During this period, such person will be ineligible to participate in USDF programs, including having his/her name removed from the list of L Graduates on the USDF Website.

I acknowledge my membership in this professional community and my responsibility to demonstrate respect for my fellow professionals at all times.

Signature:	Date:
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Printed name: \_