

# AERA Medication Control Reporting

Please fill in this form after the event and send to:

**AERA Medication Control Person, Dorte Colja,**

Email: [dortecol@gmail.com](mailto:dortecol@gmail.com)



Name of MCP Steward		
MCP Steward Contact Details		
Name of Ride		
Name of Ride Organisers		
State		
Date of ride		
Number of kits ordered		
Number of samples sent to lab		
Date samples posted		
Number of horses swabbed	FEI	AERA
Concerns		
Comments re improvements		