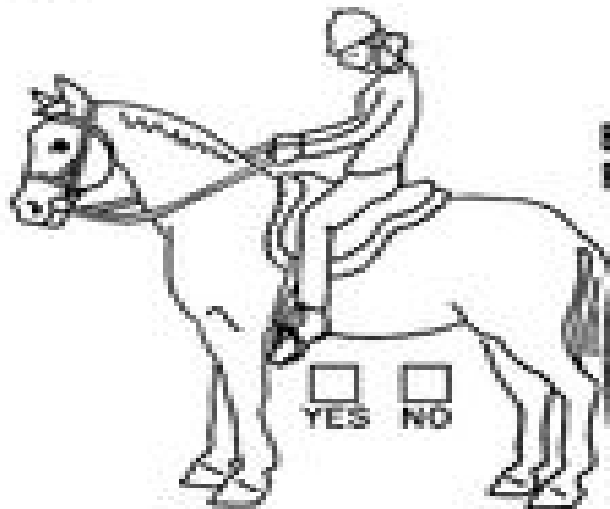


NAME _____

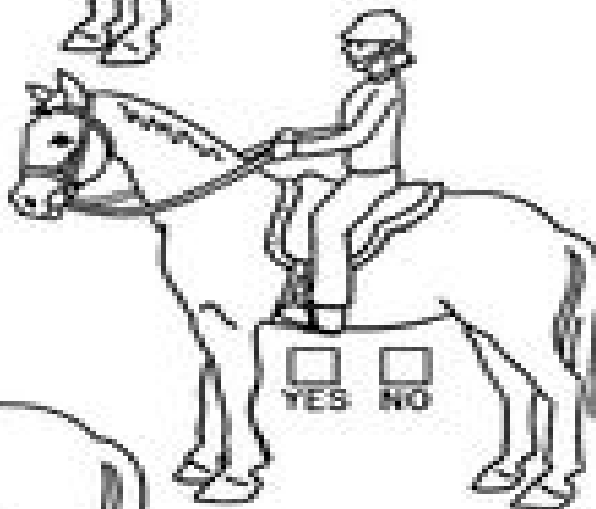
DATE _____



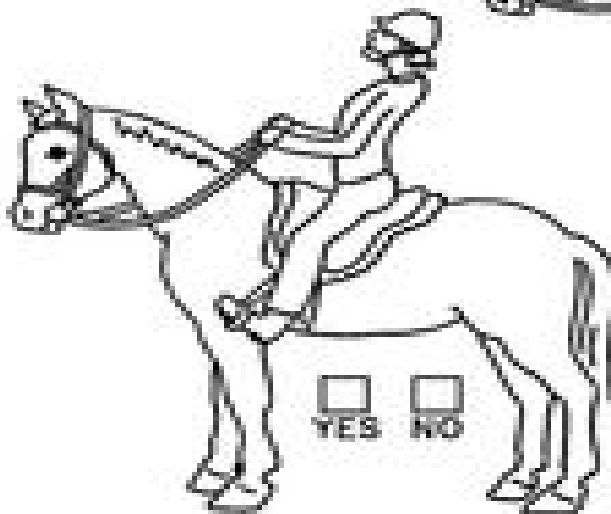
BASIC RIDING POSITION

**HEELS DOWN
HANDS DOWN
BACK STRAIGHT
LEGS BACK**

YES NO



YES NO



YES NO

✓ CHECK THE YES BOX WITH THE CORRECT POSITION