

HENDRICKS COUNTY BRIDLE BUNCH CHALLENGE FORM

Member Name _____

___ Junior ___ Intermediate ___ Senior

SPECIFY YOUR GOAL: Define precisely where you want to end up.

MEASURE YOUR GOAL: Time line? Plan of action?

ATTAINABILITY OF YOUR GOAL: What are the barriers to your success? Strengths?

OUTCOME OF YOUR GOAL: Progress? What did you learn?

Leader Signature _____ NUMBER OF POINTS (5) _____

*****TURN IN TO LEADER AT COMPLETION. ONCE SIGNED ATTACH TO POINTS TRACKER.