

# 4-H SPRING HORSE SHOW ENTRY FORM

(Nutmeg Horse Show date September 28, 2008)

Rider's Name \_\_\_\_\_ Age \_\_\_\_\_

Signature (Parent, if under 18) \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Class #	Class Name	Fee

**FAX your coggins and rabies with your entry – shorten your time at the secretary's booth – you still need to present proof of current rabies and negative coggins to enter the grounds and to verify at secretary's booth.**      **Total Due** \_\_\_\_\_  
**Total Paid** \_\_\_\_\_

Horse Name \_\_\_\_\_

Color \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Height \_\_\_\_\_

Farm/Trainer \_\_\_\_\_

The Co-operative Extension System 4-H Clubs will in no way be responsible for any damage that may occur and it shall be a condition of every entry that each exhibitor shall not hold the Show Committee, Co-operative Extension, 4-H or any 4-H Club liable for any loss or accident which may occur.

In the event of an accident requiring medical attention, I give consent and permission for my child to be transported by ambulance or EMT vehicle.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**(ENTRIES WILL NOT BE ACCEPTED UNLESS SIGNED BY A PARENT OR GUARDIAN)**

Horse Show Sec. \_\_\_\_\_ (initials) Coggins dated \_\_\_\_\_

Proof of Rabies Vaccination \_\_\_\_\_ Serial # \_\_\_\_\_

Veterinarian \_\_\_\_\_ Date \_\_\_\_\_

**Fax/Call entries by 6 pm, Thursday 5/17/07**

English – Karen Aaker- ph/fax 860-355-3120 Western – Trish McDonald ph 203-364-1036; fax 203-207-3273  
All info on [www.fairfieldcounty4h.org](http://www.fairfieldcounty4h.org)