

WEDNESDAY - HORSE SHOW

ENTRY FORM

Form May be Photocopied

PLEASE TYPE OR PRINT CLEARLY

AMADOR COUNTY FAIR HORSE SHOW

26th District Agricultural Association
PO Box 9, Plymouth, CA 95669 209-245-6921

Name of Exhibitor _____ Telephone _____ Date of Birth / /

Name of Legal Owner if Different Than Rider _____

Mailing Address _____ City _____ Zip _____ E-mail _____

Please accept these entries subject to the Rules and Regulations published in the Amador Country Fair Exhibitors Guide. I understand that my entries will not be accepted until the Release & Waiver on the reverse have been signed. In the case of team events, I certify that all team members are residents or producers qualified under the Rules & Regulations of the Amador County Fair and understand that each participant must sign a Release & Waiver. I further understand that all entries are subject to the CDFA Equine Medication Monitoring Program.

Date _____ Signature of Owner/Agent _____ Signature of Parent or Guardian (if Exhibitor under 18) _____
I certify that these entries are the project of the exhibitor and is eligible to be shown in accordance with the rules of the Amador County Fair and the State of California.

Chapter/Club/Independent _____ Signature of Leader, Instructor or Parent of Independent _____

CONSULT PREMIUM BOOK FOR CLASS NUMBERS, ENTRY FEES, ENTRY CLOSING & JUDGING DATES

PLEASE CHECK ONE () 4-H/Grange () FFA/Grange () Independent

Fair Use Only	Entry No.	Class No.	Name(s) of Rider(s) <i>(List riders name only!!!)</i>	Name of Horse(s)	Name of Owner - If Other Than Rider	Entry Fees
	1					
	2					
	3					
	4					
	5					
	6					
	7					
	8					

Fair Use Only _____
Date Paid _____
Receipt # _____
Exhibitor # _____

MISC. INFORMATION _____
STALL = Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____ Sun _____
STALL = \$15 per day X # _____ of HORSES = _____ OR \$70 for a week _____

18 & Over Exhibitor 4-day PASS = \$30 _____
Jr. Exhibitor 17 & Under 4-day PASS = \$17 _____

ENTRY FEES \$ _____

STALL FEES \$ _____

Limit 1 Per Exhibitor **PASSES** \$ _____

TOTAL ENTRY FEES \$ _____

