

AMADOR COUNTY FAIR

Horse Lease Agreement

Date _____

I, _____
Print Horse Owner's Name

Agree to lease the _____
Breed

Horse _____
Full Name of Horse Age Sex

To _____
Exhibitors Name

Of the _____
FFA / Grange / Independent

_____ **Date lease begins**

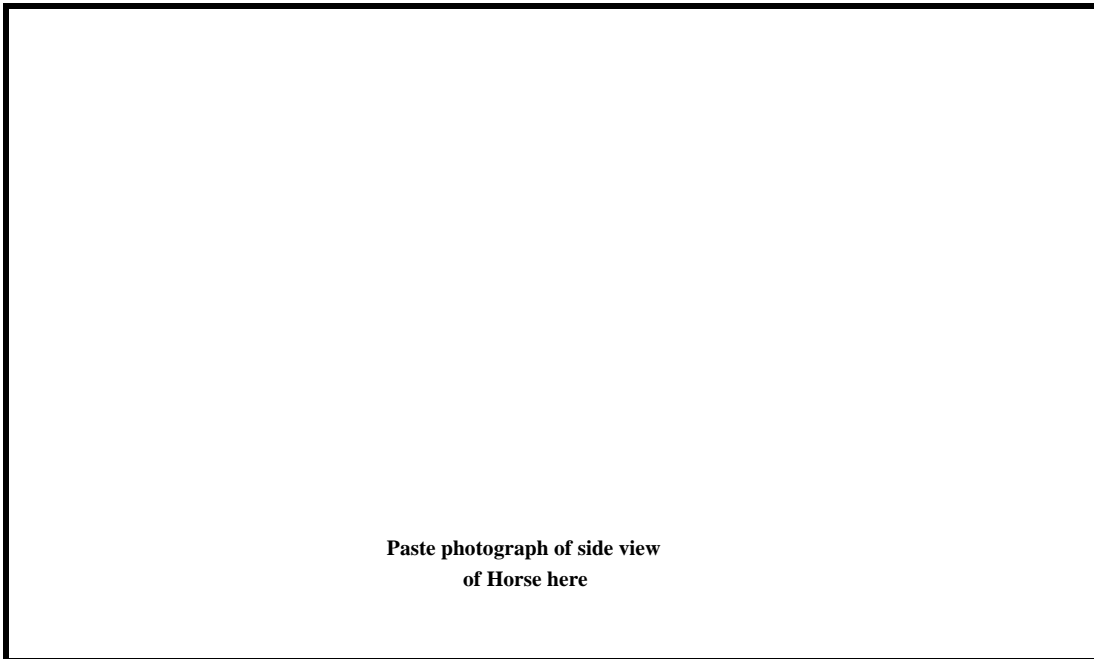
_____ **Date lease expires**

_____ **Owner's Signature**

_____ **Owner's Phone Number**

_____ **Member's Signature**

_____ **Member's Phone Number**



Return to the Fair Office after necessary signatures obtained. This form must be on file and recorded at the Amador County Fair Office on Date required by the Fair prior to the Fair Horse Show.