

WISCONSIN STATE 4-H MODEL HORSE SHOW ENTRY FORM

Entries must be sent within 7 days of qualifying show by the UWEX agent in ONE county envelope.

LATE ENTRIES WILL BE REJECTED AND RETURNED

Entry Fee \$3.00 per class plus \$5.00 stable fee

There will be a \$10.00 charge for all NSF returned checks

OFFICE USE ONLY

EXHIBITOR # _____

PAID _____

Make checks payable to **Wisconsin State 4-H Horse Association, Inc.**

Send to: STATE 4-H HORSE EXPO, Executive Secretary, Linda Pribek,
N3361 Sleepy Hollow Road, Kewaunee, WI 54216-9630

Class #	Class Name / Horse's Name	Class#	Class Name / Horse's Name
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4-H Member Name _____

Grade _____

Address _____

Street or RR

City

State

Zip

County _____ Phone (_____) _____

FEES

Entry _____

Stable _____

Total _____

ALL FOUR SIGNATURES ARE REQUIRED

I hereby enter the State 4-H Horse Expo at my own risk and agree not to Wisconsin State Fair Park, any member of the State Fair Park or management of the State 4-H Horse Expo for any damage that may occur to any display, person or participant on account of the show.

I certify that I have read the rules pertaining to said show and understand that failure to comply with these rules may result in disciplinary action which may include, but is not limited to, removal of myself and/or my entire county from current and/or subsequent State 4-H Events.

Member Signature _____

Date _____

Parent/Guardian Signature _____

Date _____

I certify that this youth is a current horse/horseless member in good standing and meets the eligibility requirements to represent this county at State Expo.

Project Leader Signature _____

Date _____

Extension Agent Signature _____

Date _____