

The Salmon Arm Fall Fair presents...

# 4-H HORSE

## Division D8 Entry Form



**ENTRY DEADLINE AUGUST 23**

Leaders, please have each member fill out their own entry form and sign. Submit all entries together directly to the Salmon Arm Fall Fair Office.  
Complete and Mail to: Salmon Arm Fair, 351 - 3rd Street SW, Salmon Arm, BC, V1E 1V4

Club Name

Leader

Phone

Email

Mailing Address

Total Number  
of "6-17"  
Exhibitor  
Passes

Total Number  
of "18+"  
Exhibitor  
Passes

Total  
Number of  
Parking  
Passes

Total  
Number of  
Camping  
Passes

Total  
Number of  
Stalls\*

\*Tack stalls may be available subject to number of entries received. Please indicate how many you may need.

Please read the rules and regulations regarding parking and camping. Clubs will receive two free leader passes. Parents/siblings can purchase admission at the gate.  
Feed and horses may be unloaded before 9am only. After 9am, vehicles without valid passes will be towed at owner's expense.

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# 4-H HORSE

## Division D8 Entry Form



BACK NUMBER

# B.C. 4-H

**ENTRY DEADLINE AUGUST 23**

Exhibitor's Name	Age (as of Jan. 1st)	
<input type="text"/>	<input type="text"/>	
Phone	Email	
<input type="text"/>	<input type="text"/>	
Horse's Name	Breed	Age
<input type="text"/>	<input type="text"/>	<input type="text"/>
Mare or Gelding	Unit	Years in 4-H
<input type="text"/>	<input type="text"/>	<input type="text"/>
Club Name	Club Leader	
<input type="text"/>	<input type="text"/>	

Please list the classes you wish to enter


I acknowledge that this event is potentially dangerous and involves risk of harm to the person and property of my child and in consideration of my child being accepted in the foregoing activity, I accept such risk on behalf of myself and my child absolutely and I agree that neither the Salmon Arm Fair, its Directors and Officers, the Management or Staff shall be held liable for any damages or injury sustained by my child while engaged in this activity or as a result of my child being on the Fair grounds for such activity. We agree to make no claim against the show or the owners of the Fair grounds, if any damage be occasioned to or loss occur to any equipment or animal or accident or injury to any members or handlers which will attend the show.

I, \_\_\_\_\_ (Parent's name) being the parent or legal guardian of  
\_\_\_\_\_ (Member's name) consent to his/her participation in the 4-H  
Horse Show at the Salmon Arm Fall Fair.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

Exhibitor Pass 6-17 Years (\$10)	<input type="text"/>
Exhibitor Pass 18+ Years (\$15)	<input type="text"/>
3 Day Camping Pass (\$30)	<input type="text"/>
3 Day Parking Pass (\$15)	<input type="text"/>
___ Classes (@ \$2 each)	<input type="text"/>
Stall (\$25 for Weekend) <small>Stall fee reimbursed if cleaned out</small>	<input type="text"/>
<b>TOTAL</b>	<input type="text"/>