Vankleek Hill Fair Light Horse Show - Western - ENTRY FORM

Note: The same number will be used for all riders of the same horse.

Send entries to: Rosemarie Huxted
613-577-2055
Rosemarie_huxted@hotmail.com

Address_____City _____

Prov./State: _____Postal/Zip Code_____ Telephone # (_____)_____

Exhibitor #1 Name: _____ Age:_____VHAS 2016 Membership #_____

Address: _____City:_____

Prov./State: _____Postal/Zip Code_____ Telephone # (_____)_____

Exhibitor #2 Name: _____Age:_____VHAS 2016 Membership #_____

Address:_____City:_____

Prov./State: _____Postal/Zip Code_____ Telephone # (_____)_____

Exhibitor #	CLASS #	NAME OF CLASS	ENTRY FEE	LATE FEE	PLACING	WINNINGS

POST ENTRIES: Entries will close ½ hour prior to start of class. **TOTALWINNINGS:** _____

TOTAL FEES:
VHAS Membership Fee $6/Exhibitor $_____ + Entry Fee(s) $_____ + Late Fee(s) $_____ = $_____

I hereby release the Vankleek Hill Agricultural Society from all claims or damages arising from any injury caused by the aforesaid animal, or occasioned by the negligence of any person or persons in charge. I shall not hold the Vankleek Hill Agricultural Society responsible for any accidents which might occur to me or anyone exhibiting my animal while participating in any events in the show.

OWNER'S SIGNATURE_____

Exhibitor #1 SIGNATURE_____

Exhibitor #2 SIGNATURE_____

PARENT'S SIGNATURE _____

_____
Insurance Company

_____
Policy Number

FOR OFFICE USE ONLY	
Insurance #	
Coggins	
Signature(s)	
Paid Cash / Cheque	

PREMISES ID ON4232605