Walk Trot A	Walk Trot B	EWD	Novice	Intermediate	Advanced	Please Circle Division

Exhibitor Name: _____ Exhibitor # [ ]

Horses Name: _____

Club Name: _____

Class #	Class Name	Paid
	Total Classes	
	Total Bill	

I understand and accept that anyone connected directly or indirectly with this show cannot be held responsible for loss, theft, damage, injury, or death to animal, exhibitor, spectator, or property. In addition to the release of any and/or all liability in case of the refusal of emergency medical attention and/or treatment as may be required by private insurer(s), 4-H and/or Fair board guidelines in the even of loss or injury.

Signature: _____ Date: _____