

# SCHAGHTICOKE FAIR HORSE SHOW

## HUNTER/JUMPER ENTRY FORM

DATE \_\_\_\_\_

TCRA# \_\_\_\_\_

SHOW NO. \_\_\_\_\_

CLASS NO.	HORSE	HEIGHT	RIDER	AGE	ENTRY FEE

WARM-UP FEE - Number of Horses \_\_\_\_\_ x \$3.00 = \_\_\_\_\_

OWNER'S NAME \_\_\_\_\_

NO. DEPOSITS \_\_\_\_\_

PARTICIPANT'S SIGNATURE \_\_\_\_\_

STALLS \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_

**TOTAL** \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY & STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email: \_\_\_\_\_

**RELEASE OF LIABILITY**

**SCHAGHTICOKE FAIR** \_\_\_\_\_

The Rensselaer County Agricultural & Horticultural Society, The Schaghticoke Fair Association will not be responsible for any accident that may occur to, be caused by any horse or pony exhibited at the show or for any article of any kind or nature that may be lost or destroyed or in any way damaged.

Each exhibitor will be responsible for any injury that may be occasioned to any person or animal or damage to any property while on the grounds by any horse owned, exhibited or in his custody or control and shall indemnify and hold harmless The Rensselaer County Agricultural & Horticultural Society, The Schaghticoke Fair Association, its officials and directors individually and collectively, and show manager, from and against all claims, demands, cause of action, costs, charges, and expenses of every kind and nature what so ever arising out of or which may be incurred by reason of any accident, injury or damage to person or property caused by the ownership, exhibition, custody or control of any animal exhibited.

Date: \_\_\_\_\_

Exhibitor \_\_\_\_\_

Phone No. \_\_\_\_\_

Signature \_\_\_\_\_  
(Parent or Guardian of Junior Exhibitor)

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# SCHAGHTICOKE FAIR HORSE SHOW

## DRAFT HORSE ENTRY FORM

DATE \_\_\_\_\_

SHOW NO. \_\_\_\_\_

CLASS NO.					HORSE	HANDLER/DRIVER	SECT.	ENTRY FEE	

PARTICIPANT'S SIGNATURE \_\_\_\_\_ NO. DEPOSITS \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ STALLS \_\_\_\_\_

ADDRESS \_\_\_\_\_ TOTAL \_\_\_\_\_

CITY & STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ Date of Birth \_\_\_\_\_ Email: \_\_\_\_\_

**RELEASE OF LIABILITY**

**SCHAGHTICOKE FAIR** \_\_\_\_\_

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Date: \_\_\_\_\_ Exhibitor \_\_\_\_\_

Phone No. \_\_\_\_\_ Signature \_\_\_\_\_  
(Parent or Guardian of Junior Exhibitor)

Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_









