

**CATTARAUGUS COUNTY FAIR 2018
OPEN HORSE SHOW ENTRY FORM**

For additional entry form copies www.cattarauguscofair.com
or Rita Kidd at 716 720 7622 Text or Call
PRE - ENTRIES - MAIL BY JULY 21

NO additional fee will be added if you enter the day of the show.

NY STATE EQUINE HEALTH REQUIREMENTS FOR COUNTY FAIRS

ALL horses MUST have a current (within 12 months) Rabies Vaccine before entering grounds
NY State horses – negative coggins test dated 2017 & 2018 if it was drawn at a NY premise or
within 12 months if drawn in another state

Out of State horses – negative coggins test dated 2018

Out of State - must have health certificate - original (not a copy) signed by a vet, within 30 days prior show

ALL HORSES & FORMS - Info must match NAME of horse, age, breed, gender, color.
www.agriculture.ny.gov/AI/Fair_Health_Requirements.pdf - Any questions - Albany 518 457 3502 or our vet 716 783 4650

If you are not able to make copies of your coggins & rabies Can be made at the horse show office - \$1. Per

ATTENTION - Parents, Trainers and any one filling out this form

YOU ARE RESPONSIBLE TO COMPLETE THIS FORM CORRECTLY.

A parent or guardian MUST Sign below for Junior Exhibitors

ONE HORSE/RIDER COMBINATION PER ENTRY FORM

IF THE RIDER ENTERS WALK TROT YOU CANNOT ENTER A CANTER/LOPE CLASS

EXHIBITOR _____ Jr. Ex. Age _____

STREET & NUMBER _____

TOWN _____ STATE _____ ZIP _____

CONTACT PHONE NUMBER _____

HORSE'S NAME _____ AGE _____ SEX _____

STABLE NAME _____

HORSE OWNER (if same write same) _____

Upon signing, I certify that every horse and/or rider is eligible as entered. I make these entries at my own risk and I am subject to the rules of the show and I agree to be bound thereby. I agree to make no claims against the Cattaraugus County Agricultural Society if any damages be occasioned or loss may occur to any vehicle, equipment or animal which I send to the show. I further agree that the Cattaraugus County Fair Horse Department shall reserve the right to reject any entry without being liable for compensation. Neither the Cattaraugus County Agricultural Society nor the Horse Show Management will be responsible for an accident which may occur to any exhibitor or to any animal exhibited for to any vehicle. The aforementioned parties shall also not be responsible for any article of any kind or nature that may be lost or stolen, although every precaution will be taken to protect the property of the exhibitors. Each person signing this entry form acknowledges that he/she has read this entry form and agrees to the applicable terms, conditions, waivers and consent as set forth herein. Each person agrees that the information is accurate to the best of his/her knowledge.

Signature of exhibitor Signature of parent/guardian Signature of horse owner

BACK NUMBER _____

ONE HORSE/RIDER COMBINATION PER ENTRY FORM
IF THE RIDER ENTERS WALK TROT YOU CANNOT ENTER A CANTER/LOPE CLASS

Class#	Class Name	Class#	Class Name

CLASSES @ \$5. _____
Leadline & Egg N Spoon are Free

OFFICE FEE @ \$10. _____
(per form) No Charge for Leadline

STALL @ \$20. _____
Saturday Evening &/or Sunday 4H No charge

TOTAL Paid _____

Make Checks Payable to:
Cattaraugus County Agricultural Society
C C A S

Mail to: Rita Kidd
481 Warren Road
Frewsburg NY 14738