



County Fair 4-H Horse Qualifying Form 2009
(complete both sides)

Name: _____ Phone#: _____

Emergency Phone#: _____

I am a Novice Jr.: _____, Jr.: _____, Novice Int.: _____, Int.: _____, Novice Sr.: _____, or Sr.: _____

Novice Junior: Will you have an attendant in the showmanship ring? Yes No

- **Attach** this form to your Fair Entry Form and submit it to the Extension office on or before Monday, **June 15, 5 p.m.**
- **Attach** a copy of your lease(s) if you are using a leased horse.
- **All sections** of this form (front & back) must be completed for you to be eligible to participate in the 4-H Horse Show at County Fair. **Member – Leaders – Parents: Don't Forget To Sign It!!**

Horse Information: Vaccination Record and Dates, Veterinary:



Veterinary's Name & Phone#: _____

Tetanus: _____ Influenza: _____

Encephalomyelitis: _____

Other: _____, Date: _____ Other: _____, Date: _____

Parasite Control and Dates:

Method & Drug: _____, Date: _____

Method & Drug: _____, Date: _____

Foot Care and Dates: (trimmed or shod)

_____, Date: _____ _____, Date: _____

Horse Declaration: please put the name of the horse you will use for:

Performance: _____ Ground Training: _____

Gaming: _____ Driving: _____

List any other horse that you are carrying in your record book:

Parent and Leader:

- My member has attended: Horse Judging _____ and/or _____ Horse Bowl in the current 4-H year.
- My member has completed the following Horse Advancements and they are signed off:

_____ Step 1 (The 4-H Rider)	_____ Step 4-A (The Advanced Horseman)
_____ Step 2 (The 4-H Trail Rider)	_____ Step 4-B (The 4-H Colt Trainer)
_____ Step 3 (The 4-H Horseman)	_____ Step 4-C (The 4-H Stockman)

Parent's Signature

Leader's Signature

4-H Horse Member's Permission Form 2009
(complete both sides)

This form needs to be completed and returned for any Columbia County horse member who wants to compete at County or State Fair.

Return to the Extension office by Monday, June 15, 5 p.m.

Name of Member: _____ Jr.: ____, Int.: ____, or Sr.: ____

Parents:

A. To be completed by parent of all members: Emergency Medical Release

As a parent of the above named member, I authorize the 4-H Leaders in charge of the Columbia County 4-H Horse Show, the Extension Agent, or the Columbia County Fair Board to secure medical attention by a physician for our son or daughter if needed while they are at the Fair.

Doctor's Name

Phone

Insurance Provider

Group #

Parent's Signature

B. To be completed by parent of Intermediates and Seniors:

If my child is eligible through County selection to attend State Fair, I will arrange for transportation and supervision at the State Fair. I will pay a \$30.00 fee for State Fair as a qualifier and/or alternate. The fee is due at the time of the State Fair Horse Exhibitors meeting held following the Horse Awards Program at County Fair (this fee is for plaques, pictures, decorations, etc.). All unused monies will be used for State Fair decorations. Refund Policy: no refunds will be made after 10 business days from the state fair horse meeting.

Parent's Signature



Member:

A. To be completed by the member – Junior, Intermediate or Senior:

I understand that points from Showmanship plus either English or Western Equitation (whichever is highest), will count towards selection for any special awards or for State Fair qualification. I understand that in the event of a tie, the trail score, then presentation/public speaking scores, and if a tie still results showmanship scores will be used to break it.

Member's Signature