**GREENE COUNTY 4-H HORSE SHOW ENTRY FORM – Due by June 12, 2017**

Exhibitor’s Name_______________________________________Club_______________________

Phone #_________________________________________ Email Address: __________________________

Exhibitor’s 4-H Age (12/31/2016) __________

Mail to:  Greene County 4-H Leader’s Council
P O Box 6398
Springfield, MO 65801
Email to: greeneco4hlc@gmail.com

---

<table>
<thead>
<tr>
<th>Name of Horse:</th>
<th>Circle One: Horse or Pony</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In the boxes below, list the Class Numbers you are entering for this Horse - (One class number per box)

<table>
<thead>
<tr>
<th>Name of Horse:</th>
<th>Circle One: Horse or Pony</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In the boxes below, list the Class Numbers you are entering for this Horse - (One class number per box)

<table>
<thead>
<tr>
<th>Name of Horse:</th>
<th>Circle One: Horse or Pony</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In the boxes below, list the Class Numbers you are entering for this Horse - (One class number per box)

---

ALL AROUND HORSEMANSHIP AWARD:

_____I wish to participate in ALL AROUND HORSEMANSHIP events;

My mount will be: ________________________________________________________________

Name of Horse or Pony (please remember to designate only one animal)

_____ I plan to give a live horse demonstration.

Demonstration Title or Topic: _______________________________________________________

---

List any other livestock divisions that you are also competing in during the Fair so we can be prepared to help you work around any potential scheduling conflicts. (i.e. poultry, beef, etc.)

---

**Both pages of the Entry Form must be submitted to be considered a complete entry.**

**** ENTRY FORM CONTINUED ON THE NEXT PAGE ****
I certify that this member has attended at least half of the Club meetings held and is a member in good standing with our 4-H Club.

_________________________________

Club Leader’s Signature

I certify that this member attended a majority of the project meetings and is a member in good standing within the enrolled Project.

_________________________________________

Project Leader’s Signature

I acknowledge that the Greene County 4-H Fair Horse Show committee strongly encourages that Greene County 4-H Horse Show participants wear protective headgear (i.e. equestrian safety helmet) of a quality not less than an SEI Certified ASTM Standard F 1163 Equestrian Riding Helmet during participation in the Greene County 4-H Fair Horse Show activities. I do understand that the wearing of such protective headgear while mounting, riding, dismounting and otherwise being around horses, may prevent or reduce severity of some of the headgear wearer’s head injuries and may even prevent the wearer’s death from happening as the result of a fall from a horse or other occurrence. Except for the classes and activities which specifically require the participant to wear an equestrian safety helmet as stated in the 4-H Fair handbook rules, the final responsibility for wearing protective headgear in all other classes and activities where safety helmets are not required, but are optional, is up to the 4-H member, parent, or guardian.

_________________________________________

4-H Member’s Signature

_________________________________________

Parent or Legal Guardian Signature

**Both pages of the Entry Form must be submitted to be considered a complete entry.**