

Minnesota State Fair Entry Form AUG. 24 - SEPT. 4, 2017

APHA/ AQHA/ PTHA/ ApHC HORSE ENTRY FORM ONLY *(one form per horse)*

OFFICE USE ONLY - LAST

OFFICE USE ONLY - DO NOT WRITE IN THIS BOX	Exhibitor number	Control number
<input type="checkbox"/> Owner W-9 on file	Horse number	

I hereby certify that every horse and rider is eligible as entered and agree to be subject to the Minnesota State Fair rules and regulations as listed in the premium book, and all applicable provisions of the Minnesota Statute 37. I further agree to hold the Minnesota State Fair, its Horse Show and any other affiliated organizations harmless for any and all damages sustained for any reason whatsoever, and agree to be responsible for any and all damages that may occur to be caused by any animal or vehicle exhibited or owned by me.

Name of Horse		
Registration #	Foaling date	
Color	Breed	
Height	Sex	
Owner		
Owner APHA #	Owner AQHA #	
Owner ApHC #	Owner PTHA #	
Owner Address		
City	State	
Phone <i>(include area code)</i>		
E-mail		

Mail-in entries close MONDAY JULY 24
Or enter ONLINE at www.mnstatefair.org

Mail Entries to:

MINNESOTA STATE FAIR
 COMPETITION - HORSES
1265 SNELLING AVE. N.
ST. PAUL, MN 55108

Additional entry forms and premium books may be downloaded from the Minnesota State Fair Web site, www.mnstatefair.org

***PLEASE NOTE! A COMPLETED W-9 MUST ACCOMPANY ENTRY. Each exhibitor must provide his or her TIN (Taxpayer Identification Number) You will **NOT** be permitted to exhibit without this information on file.

By the act of entering this show, owners, lessees and exhibitors agree that PTHA, the sponsoring charter/club, the show grounds and the show committee will not be held responsible for any loss, injury or damage or debts in connection with this show.

FIRST

Rider 1 or 2	Class #	Entry Fee
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Pinto show fee \$5/judge <i>PTHA classes ONLY</i>		\$ 10.00
APHA show fee (per horse) <i>APHA classes ONLY</i>		\$ 4.00
AQHA/MQHA drug fee (per horse) <i>AQHA classes ONLY</i>		\$ 12.00
Grand Total		\$

RIDER 1 ~ Name		
Address		
City	State	Zip
APHA/ AQHA/ ApHC/ PTHA ID #	Exp. date	Amateur #
Youth/Amateur relationship to owner		Youth/Amateur DOB
Phone <i>(include area code)</i>		
Signature		

RIDER 2 ~ Name		
Address		
City	State	Zip
APHA/ AQHA/ ApHC/ PTHA ID #	Exp. date	Amateur #
Youth/Amateur relationship to owner		Youth/Amateur DOB
Phone <i>(include area code)</i>		
Signature		

Owner signature <i>(must be adult)</i>
Trainer signature <i>(if applicable)</i>
Parent or Guardian signature <i>(if under 18 years of age)</i>

By entering this show, I agree to exhibit the above horse in accordance to all AQHA rules and regulations, and hereby release this show, the facilities, employees, agents and/or sponsors from any liability or claims, for any reason, due to accident, theft, or death to myself, agents, employees; equipment or animals.

EX #