

ONLY ONE (1) OWNER PER FORM

OWNER	
Print Name of Legal Owner (Sign Liability Statement on Reverse Side)	
Street or P.O. Box of Owner or Agent	
City	State Zip
Owner's Email Address	
Phone No. of Owner	
BREED ASSOCIATION #	

Oregon State Fair

Horse Show

(CIRCLE BREED)

**Drum, Gypsy, Miniature Horse (AMHA),
Mule, Mustang, Burro,
Peruvian, TWH, Open Classes**

COMPLETE BOTH SIDES OF THIS FORM

August 31 – September 5, 2021

**Oregon State Fair and Exposition Center,
Salem, Oregon**

OR ONLINE @ www.HorseShowsOnline.com

POST ENTRY FEE AFTER August 21, 2021

TRAINER	
Print Trainer's Name (Sign Liability Statement on Reverse Side)	
Street or P.O. Box of Trainer	
City	State Zip
Trainer's Email Address	
Phone No. of Trainer	
BREED ASSOCIATION #	

LEAVE BLANK	NAME OF HORSE (Class Number Under Name. One Class Per Square)	TOTAL FEES	DESCRIPTION	BREED REG NO. IF APPLICABLE	RIDER, DRIVER OR HANDLER	
			Sex:		NAME:	
			DOB:		Amateur – Y/N	Junior DOB:
			Sex:		NAME:	
			DOB:		Amateur – Y/N	Junior DOB
			Sex:		NAME:	
			DOB:		Amateur – Y/N	Junior DOB
			Sex:		NAME:	
			DOB:		Amateur – Y/N	Junior DOB

PLEASE SEND COPIES OF HORSE REGISTRATION PAPERS, SHOWING PROOF OF OWNERSHIP, and copies of your MEMBERSHIP CARDS, AS APPLICABLE, WITH THIS ENTRY FORM. If membership cards are not presented, exhibitors will have to Join At Show.

OFFICE USE ONLY
AMT PAID _____ FOR #S _____
CHECK # _____ RECEIPT _____
_____ REGISTRATION PAPERS (IF APPLICABLE)
_____ ASSOCIATION MEMBERSHIP CARDS (IF APPLICABLE)

**MAKE ALL CHECKS PAYABLE TO:
OREGON STATE FAIR**

**NO ENTRIES ACCEPTED UNLESS
ACCOMPANIED BY CHECK IN FULL
**NO BLANK CHECKS WILL BE
ACCEPTED****

**FOR MORE INFORMATION CALL:
Ron Hood, Show Manager
831-524-5248**

**MAIL ENTRIES TO:
Oregon State Fair Horse Show
2330 17th Street NE
Salem, OR 97301**

ENTRY FEES.....\$ _____
 POST ENTRY FEE (PER HORSE – SEE RULE 1b.).....(____) x \$ 15 \$ _____
 OFFICE FEES (PER HORSE)(____) x \$ 15 \$ _____
 STALLS, refer to breed division for amount.....(____) x \$ \$ _____
 TACK/FEED STALLS refer to breed division for amount.....(____) x \$ \$ _____
ATTACH STALL RESERVATION SHEET
 EARLY ARRIVALS (PER DAY, PER STALL) see day limits(____) x \$ 25 \$ _____
 Haul in Fee per horse, per day - horses not requiring stalls(____) x \$ 20 \$ _____
 AMHA Miniature Horse Fee (per horse).....(____) x \$ 5 \$ _____

TOTAL ENCLOSED _____

