Washington	County	Fair F	lorse	Show
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Class No.:	Back No.:	Entry Form	Score Time:	Placing:
Name of Class: _			Exhibitor:	
Name of Horse: _			Address:	
Owner:				
Address:			Phone #:	
Fmail:				

PLEASE ATTACH 1 COPY OF HORSE'S COGGINS

Signature **MUST BE 18 YRS. OLD TO SIGN**

I hereby enter the above listed horse at my own risk and subject to all rules and regulations of the show. I further agree that if any damage be occasioned, or loss occur to the horse exhibited, to any vehicle, article which I may send with such horses. I will make no claim, therefore.