

Return Entry Form & Check for All Fees Payable To:

**AMERICAN LEGION COUNTY FAIR**

P O Box 147, 883 North Julian St.  
Ebensburg, PA 15931

Registration: \$5.00 per head. Registrations are not accepted without the entry fee. All fees are non-refundable. Registrations submitted after July 14<sup>th</sup> will not be accepted. SUBSTITUTIONS / CHANGES WILL NOT BE ACCEPTED AFTER AUGUST 15<sup>TH</sup>.

For each animal entered but not exhibited a penalty of \$25 will be charged to the exhibitor. **Entries that are cancelled on or before Aug. 15, 2023, must be of written notification to ccfair.verizon.net** and will not be penalized.

All stalls must be cleaned upon the exit of your animal. It is not the superindendants responsibility to clean stalls, the exhibitor is responsible. Failure to comply will result in premium checks being held.

Entries will be released from the barn at 7 pm the last Saturday of fair week. Stall decorations must remain on display and maintained until the animals leave the grounds.

**Each exhibitor is responsible for lanyard registrations.** Lanyard form links are located on our website <https://cambriacofair.com/> or <https://sites.google.com/view/american-legion-co-fair/home> If you have any problems accessing these sites please email us at **ccfair@verizon.net**.

Lanyard registrations submitted after July 14<sup>th</sup> will not accepted. Exhibitor Lanyards are \$10 and Family Lanyards are \$20 each.

**NEW LANYARD DISTRIBUTION:** Lanyards must be paid for and picked up at the fair office Aug. 21 - 25 Monday thru Friday 9 to 4 or Saturday August 19<sup>th</sup> 12 to 4 pm. **Lanyards will not be available Livestock check-in day.**

Riders 17 and under **must wear hard hats at all times when on their equine**, in or out of the ring.

*The exhibitor is responsible for providing a Complete Name and mailing Address. Premium checks will be held at the fair office due to illegible / insufficient addresses. Returned checks will not be reissued.*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Age: \_\_\_\_\_

City: \_\_\_\_\_ State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_

If Applicable - Parent/Guardian: \_\_\_\_\_

# of Horses being Stabled together: \_\_\_\_\_

**I attest and affirm that a "Veterinary Client Patient Relationship" at 3 Pa. C.S.A. §2501 et seq. and any amendments thereto" exists with regard to any animals I will be exhibiting.**

*(Must be included - PLEASE PRINT)*

Vet Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

**I Agree to Abide by the Code of Show Ring Ethics & Understand that all Judge Decisions Are Final**

Upon my signature on this entry form I hereby release the sponsor, their officers, directors, members, and superintendents at the American Legion County Fair from any claim of right for damages, which may occur to myself or my horse. I also assume full responsibility for any damages done by myself or my horse.

(Signature of Exhibitor)

\_\_\_\_\_  
(Signature of Parent/Guardian)

**IT IS YOUR RESPONSIBILITY AS AN EXHIBITOR TO READ AND BE AWARE OF ALL RULES AND REGULATIONS**