

Department 1 - EQUINE  
Superintendent – KIM HILDEBRAND

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

**PREMIUMS: 1st Ribbon 2nd Ribbon 3rd Ribbon 4th Ribbon 5th Ribbon**

**There is no charge for our PEE WEE classes.**

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

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

City: \_\_\_\_\_ State, Zip: \_\_\_\_\_ Age: \_\_\_\_\_

I understand as the parent or legal guardian of the exhibitor that I am solely responsible for any loss, injury, damage done or occasioned by or arising from any exhibit I have entered. I shall indemnify and hold harmless the American Legion County Fair against such loss, injury or damage.

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

<b>Depart.</b>	<b>Section</b>	<b>Class</b>	<b>Articles: Use Wording-Premium Book</b>

\_\_\_\_\_  
(Signature of Exhibitor) DATE: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Parent / Legal Guardian) DATE: \_\_\_\_\_

**No Exhibitor will be allowed to participate without Parent / Legal Guardian Signature**

