



Upon signing below, I confirm that the member meets the eligibility requirements of the show rules and that I will not hold the owner of the show grounds or the Wisconsin State 4-H Horse Association, Inc. responsible for any injury or theft.

**ALL FOUR SIGNATURES ARE REQUIRED**

Member Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

My signature gives consent to UW Extension & the 4-H Horse Association the right to use, publish, and copyright my image (including audio, moving image or photograph) for educational programs, website & promotion programs. UW Extension & 4-H Horse Association adheres to all Federal & State laws associated with this use.

Project Leader Signature \_\_\_\_\_

Date \_\_\_\_\_

This youth is a member in good standing, has met all club requirements and achieved the skills required to compete at state level in the classes entered.

Extension Agent Signature \_\_\_\_\_

Date \_\_\_\_\_

**Include copy of current Coggins with this form**

<b>FEES</b>	
Entry	_____
Stable	_____
Mini-Event	_____
Total	_____

<b>OFFICE USE ONLY</b>	
EXHIBITOR #	_____
PAID	_____