

Quarter Horse, Palomino, Low Hunter, Miniature

SECTION I - NEW YORK STATE FAIR HORSE SHOW
 NEW YORK STATE FAIR COLISEUM - SYRACUSE, NEW YORK

WHITE ENTRY FORM

Entry Number _____

ONLY ONE HORSE TO EACH ENTRY BLANK - PLEASE ENCLOSE COPIES OF REGISTRATION PAPERS AND MEMBERSHIP CARDS

NAME OF HORSE	Sex	Year Foaled	Registration # & Breed	Registration # & Breed

YOUTH CLASSES

Office Use	Name of Youth Rider		Youth #		Date of Birth		Relation To Owner	
	Street Address		Class #s					Entry Fee
	City	State	Zip					

AMATEUR CLASSES

Office Use	Name of Amateur Rider		Amateur #		Issued By		Relation To Owner	
	Street Address		Class #s					Entry Fee
	City	State	Zip					

OPEN PERFORMANCE/OPEN HALTER CLASSES

Office Use	Name of Rider/Driver/Handler		Membership #	Class #s First Rider				Entry Fee
	1. _____							
			Membership #	Class #s Second Rider				
	2. _____							

OWNER INFORMATION - PLEASE PRINT

Owner's Name	
Street Address	
City	State Zip
Telephone	
Owner ID#	Breed
Owner ID#	Breed
Social Security #	E-Mail

Box Stalls @ \$70.00 - AQHA, Misc Open	
Tie Stalls @ \$30.00 - if available	
Office Fee @ \$15.00 per horse	
Spectator Boxes: 6 Seats 9 Seats 12 Seats \$70.00 \$100.00 \$130.00	
Palomino Fee @ \$21.00 (3 Judges)	
AQHA Fee @ \$10.00 (2 judges)	
Mini Tie Stalls @ \$30.00 - includes gate if available	
Mini Box Stalls @ \$70.00 - can use for 2 horses	
Palomino Stalls @ \$40.00	
TOTAL AMOUNT	
AMOUNT ENCLOSED	
BALANCE DUE	

TRAINER'S NAME _____

TRAINER'S PHONE _____

I certify that every horse and/or rider or driver is eligible as entered. I make these entries at my own risk and subject to rules of this show and I agree to be bound thereby. I agree to make no claims against the New York State Fair if any damages be occasioned or loss occur to any vehicle, equipment or animal which I send to the show, and I agree to pay the show the sum of \$100 as and for liquidated damages if any animal which I exhibit is suffering from contagious disease. And I further agree that the New York State Fair Show shall reserve the right to reject this entry without being liable for compensation.

I AGREE TO ABIDE BY THE NEW YORK STATE DRUG LAW, REFUSAL TO BE TESTED WILL RESULT IN FORFEITURE OF ENTRY FEES, STALL FEES, PREMIUMS AND PRIZES, AND FURTHER DISCIPLINARY ACTION AS PRESCRIBED BY LAW.

Signature Below Indicates That Signer Has Read and Understands All of The Above

Owner, Agent, or Parent's Signature

STABLE WITH:

Number of Miniature Horse Gates Requested: _____

BOX STALL FEES

Palomino: \$40.00 All Others: \$ 70.00
 Palominos staying over to show additional classes pay \$70.00

ENTRY & STALL FEES MUST ACCOMPANY THIS FORM
All Premium Checks will be made payable to owner of horses.
Premium checks will not be paid without owner's social security number.

Canadian Checks Must Be Marked: Payable in U.S. Funds
 MAKE CHECKS PAYABLE TO: **NY State Fair**
 Mail To: **NYS Fair Entry Dept, 581 State Fair Blvd, Syracuse, NY 13209**
 FMI: Naomi Blumenthal - nblumenthal@twcny.rr.com

Name to appear on Coliseum box (if ordered)

WHITE ENTRY FORM

OR