

**2025 New York State Fair  
4-H Horse Show Exhibitor**

Region # \_\_\_\_\_

Check \_\_\_ A \_\_\_ B (If appropriate)

☐

Male

☐

Female

Exhibitor's name (Last, First)

County of Youth Membership

Full Address (Route, Box and/or Street, Town, State, ZIP CODE)

3 / /

Age of Exhibitor  
(as of January 1, 2025)

Birthdate of  
Exhibitor

Cell Phone #

Email Address

\*\*\*\*\*

<b>Equine #1</b>											
Name of Equine				Breed or Type							
Registered				Animal's Birth Date							
		Horse	Pony	Donkey	Mule	Mini	Driving			Owned	Non Owned
Check one of the above								Check One			

<b>Equine #2</b>											
Name of Equine				Breed or Type							
Registered				Animal's Birth Date							
		Horse	Pony	Donkey	Mule	Mini	Driving			Owned	Non Owned
Check one of the above								Check One			

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- Once completed, return this entry blank to your 4-H office so it can be processed in time for the State Fair entry deadline of **August 2, 2025**.
- Check with your 4-H Educator or authorized signer to be sure that you are covered with accident and health insurance.

**Completed entry blanks MUST carry the following signatures to be valid. There is NO time for phone calls.**

Exhibitor's Signature

Parent's Signature

CCE 4-H Division, Educator or Designee

\_\_\_\_\_ Check here if this youth has a photo release form on file in the County CCE Office

**All forms must be signed by the Exhibitor, Parent and Educator. This form and a copy of the Rabies and Coggins must be submitted in the State Fair Horse Show Cornell Box by the educator.**