

Owner Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Telephone w/area code () _____
 Email Address _____
 Farm Name - Hitch Classes Only _____

OHIO STATE FAIR DRAFT HORSE SHOW

ENTRY DEADLINE - JUNE 20

One Owner Per Entry Form

Premiums check will made out to the name on the entry form. If joint owner, *ONLY* one name needs to be listed on entry, and premiums will paid to *ONLY* one person, the person listed on the entry form.

Mail entry form to the Entry Department, Ohio State Fair, 717 East 17th Avenue, Columbus, Ohio 43211. All entries must bear a postage stamp and have a legible cancellation date. Metered entries will not be accepted.

Circle breed you are entering: Percheron; Belgian; Draft Pony; Clydesdale; Haflinger; or Shire

Please be sure to read Rules and Regulations

Office Use Only	Class No.		Entry Fee	Horses Name	Description	Sire of Foal	Dam of Foal	Handler/Driver/Rider
					Reg. No. Sex: M S G/Yr Foal			
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					Reg. No. Sex: M S G/Yr Foal			

Hitch Classes - can be under farm name for multiple Hitch Classes

Class No.	Driver	Fees	Class No.	Driver	Fees	Class No.	Driver	Fees
	Youth Team			Ohio Team			Four	
	Team			Tandem			Six	
	Team			Buckeye Team			Governor's Cup	
	Sr Driving			Unicorn				

Stall (one per horse).....\$40 x _____ \$ _____
 Tack Stalls..... \$60 x _____ \$ _____
 Single Day Admission..... \$ 6 x _____ \$ _____
 6 Day Admission..... \$28 x _____ \$ _____
 3 Day Parking Pass..... \$30 x _____ \$ _____
 6 Day Parking Pass..... \$50 x _____ \$ _____
 Additional Parking Pass..... \$75 x _____ \$ _____
 Total Entry Fees Due \$ _____

Office Use Check # _____ Date Rec'd _____ Over _____ Under _____
 Cards/Papers _____
 Parking Ticket No. _____
 Entry Ticket No. _____
 Stall Copy _____
 Entry Copy _____
 Acknowledge Letter _____

PAYMENT TYPE: CHECK CREDIT CARD

Mastercard Visa Acct# _____ Exp Date _____
 Month/Year

I understand by signing this entry form, that I accept and will follow all rules and regulations of the Ohio State Fair. I further understand that equine activities have an apparent risk and I accept that risk for myself and/or the minor child I am signing for.

Parent or Guardian Signature _____

Child's Name _____

Age _____ Birthdate _____

Arrival Date _____

Departure Date _____

Stable With _____

Parking permits cannot be combined. You may purchase either one 3-day or one 6-day parking permit. Additional 6-day parking permits may be purchased at \$75 each.