BOONE COUNTY FAIR DRAFT HORSE SHOW

Belvidere, Illinois

DEPT. C ONLY

Make checks payable to the Boone County Fair (or BCFA) Group classes are counted as entries. Use one line per group on form.

Exhibitor's Name			Date
Address			Telephone
CityStateZip Exhibitors please see catalog for fees, stall/p		_ □ Check if New Address	SS# Required by State
ADMINISTRATION FEE @ \$5.00 PER DEPT. List number of stalls needed:		\$ 5.00 Nu	mber of Animals Entered
# Double Tack Stall @ \$20.00	=	\$	EXHIBITOR'S
# Draft Horse Tie Stall @ \$10.00	=	\$	NUMBER
# Draft Horse Box Stall @ \$20.00	=	\$	
TOTAL ENTRY FEES (from entries below)	=	\$	
EXHIBITOR'S TICKETS (\$20.00) (Max 2) #	_ =	\$	
SEASON TICKETS (\$25.00) #	=	\$	
TOTAL AMOUNT ENCLOS	ED	\$	

□ CASH □ CHECK – CK#__

Mail to: Susan Banks, PO Box 97, Belvidere, IL 61008 (815-871-1060)

Make checks payable to: Boone County Fair Association (or BCFA)

· · · · · · · · · · · · · · · · · · ·		HORSE'S NAME	SEX	YEAR	DRIVER		
PREM. NO.	BREED	HORSE'S REGISTRATION #	(S/M/G)	FOALED	OR EXHIBITOR	ENTRY FEE	
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I have read and understand, and in consideration for being permitted to exhibit at this			need more e use 2nd	TOTAL ENTRY FEES	I		
event, agree	event, agree and consent to abide by the rules of competition, including the IAFE (In-			et or use			
ternational Association of Fairs and Expositions) National Code of Show Ring Ethics as stated in the premium list of this event.		8-1/2x11" plain paper and attach		ANIMALS WILL NOT BE RELEASED UNTIL 4 PM SUNDAY			

		HORSE'S NAME	SEX	YEAR	DRIVER	
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