CEF # _____
IAHA # _____
CMHA #_____

SUTTON FAIR AND HORSE SHOW 20_____

Sutton Fair
P.O. Box 460
Sutton, Ont. L0E 1R0
Tel: (905) 722-3165
Fax: (905) 722-3160

ENTRY FORM - PLEASE USE A SEPARATE FORM FOR EACH HORSE and DIVISION

Prize Money Paid To: Owner ____ Rider ____ (Please mark appropriate box)

PLEASE PROVIDE PROOF OF LIABILITY INSURANCE

Insurance Company: _____ Insurance Policy Number: _____

Owner's Name: _____ Address Box # ___ RR# ___ Street _____Town & Postal Code _____

Owner's Phone No. _____ Mailing Address if different from above _____

Rider's Name: _____ Address Box # ___ RR# ___ Street _____Town & Postal Code _____

Rider's Phone No. _____ Mailing Address if different from above _____

eMail Address: _____

SHOW #	NAME OF HORSE	REGISTRATION #	M – MARE S – STALLION G – GELDING	CLASS	SECTION								HANDLER / RIDER NAME

Every entry at a recognized show shall constitute an agreement between that person making it, owner, lessee, trainer, manager, agent, driver, rider, and horse shall be subject to the constitution and the rules of the Federation, the local rules of the show and that every horse, rider, and/or driver is eligible as entered and that the owner and any of his representatives are bound by the constitution and rules of the N.E.F.C. and the show. Accept as Final the decision of the hearing committee on any question arising and agree to hold the show, the N.E.F.C., their officials, directors and employees harmless for any action taken. "I hereby enter the above horses at my own risk and subject to the rules of Sutton Fair. I agree to make no claims against the Fair if any damage be occasioned or loss occur to any vehicle, animal, person or property while on the fairgrounds."

NUMBER OF HORSES EXHIBITED: _____

All prize winnings over $8.00 are subject to 15% deduction.

Exhibitor Fee	$_____
Late Entry	$_____
Champion/Stake Class	$_____
TOTAL SUBMITTED	$_____
TOTAL PRIZE MONEY	$_____
Less 15%	$_____
TOTAL PAID	$_____

FOR OFFICE USE ONLY