

KENTUCKY STATE 4-H HORSE JUDGING CONTEST
KENTUCKY HORSE PARK COVERED ARENA, LEXINGTON, KY
THURSDAY, JUNE 2nd, 2011

Entry Fee: \$12 per individual

County: _____ District _____

_____ Senior Team _____ Junior Team _____ Senior Individual _____ Junior Individual

	Name	Address (Street, City, State, Zip)	Date of Birth	Age as of 1/1/11
A				
B				
C				
D				

Coaches Name	Address (Street, City, State, Zip)	Phone Number

CERTIFIED VOLUNTEER LEADER: I certify that the 4-H member has completed 6 hours of education.

SIGNED: _____ DATE: _____

COUNTY AGENT: I understand the rules governing the KY 4-H Horse Program and certify the eligibility of the above named contestant as completing all requirements necessary for competition in the classes entered above. SIGNED: _____ DATE: _____

****PLEASE NOTE-All cross county line entries must be accompanied by Form A with all 4 signatures required.**

COUNTY AGENTS:

ONE CHECK PER COUNTY

Send Payment and Entry Form by May 25th to:

KY 4-H Horse Judging Contest

615 W.P. Garrigus Building

Lexington, KY 40546-0215

Make all checks payable to "KY 4-H Foundation"