

Racine County Fair Horse & Pony Project
2019 HORSE ID FORM

EXHIBITOR INFORMATION

Name:					
4H/FFA Club:			Phone:		
Current address:					
City:		State:		ZIP Code:	
Email Address:					
Horse or Horseless Project Member:					
If horseless, name of exhibitor you are sharing horse with:					
HORSE #1					
Name of Horse (use name on coggins)					
Color:		Premise ID #:			
Breed:		Sex:			
Horse Owner:		Owner's Telephone #			
HORSE #2					
Name of Horse (use name on coggins)					
Color:		Premise ID #:			
Breed:		Sex:			
Horse Owner:		Owner's Telephone #			
HORSE #3					
Name of Horse (use name on coggins)					
Color:		Premise ID #:			
Breed:		Sex:			
Horse Owner:		Owner's Telephone #			
HORSE #4					
Name of Horse (use name on coggins)					
Color:		Premise ID #:			
Breed:		Sex:			
Horse Owner:		Owner's Telephone #			
BY SIGNING THIS FORM YOU AGREE THAT THE INFORMATION ABOVE IS FILLED OUT CORRECTLY AND COMPLETELY.					
Signature of Exhibitor				Date:	
Signature of Parent/Guardian				Date	