**ENTRY FORM – MTAS CHILDREN’S FUN PONY & HORSE; SADDLE, HARNESS & MINI; AND HEAVY HORSE DIVISIONS**

Mail entries for Children’s Fun Pony & Horse Show to: **Sarah Holmes, 11900 Cty Rd 38, Winchester ON K0C 2K0**

Mail entries for Saturday Saddle and Harness & Mini Horse Show to: **Mrs. Catherine Douglas, 5996 Snake Island Road, Osgoode, ON K0A 2W0**

Mail Entries for Sunday Heavy Horse & Mini Horse Show to: **Christy Stewart, 2698 8th Line Road, Box 142, Metcalfe, ON K0A 2P0**

**Exhibitor Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ shall indemnify and hold harmless the **"Mountain Township Agricultural Society",** its Directors, Officers, Members, Agents and Employees from and against all claims, demands, losses, costs, damages, Actions, Suits or any proceedings by any third parties that may arise out of, or maybe Attributed to, all actions carried out by the **"Mountain Township Agricultural Society"** for which I may be held liable, howsoever caused. I hereby assume full responsibility for any risk of bodily injury, death or property damage out of the event whether caused by negligence of the releases or otherwise.

**Exhibitor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Division | Class | Name of Horse/Pony | Name of Rider/Driver | Sex | Height of Animal | Age of Junior | Entry Fee $$$ | Number | Placing | Prize $$$ | Stall  Fees |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |

**NAME OF LIABILITY INSURANCE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ENTRY FEE TOTAL $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**POLICY # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EXPIRY DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STALL FEE TOTAL $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MEMBERSHIP FEE $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**