

HORSE & PONY DOCUMENTATION FORM – 2022

This form must be filled out and provided to the applicable species superintendent or their designee upon check-in at the fairgrounds.

Exhibitor Name _____	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Exhibitor Date of Birth _____ Month _____ Day _____ Year (used to determine exhibitor eligibility)		
Address _____		City _____ Zip _____
Phone _____	Cell # _____	
Email address _____		
Parents/Guardian Name(s) (minors only) _____		
4-H Club (if applicable) _____		

HORSE #1

Horse Registered Name _____

Horse Owner's Name _____ Phone _____

Horse Owner's Address _____
(if different from exhibitor)

Premises I.D. # _____

 ATTACHED: Coggins Test Results. Date Completed: _____
(Coggins test valid for 12 months in the state of Wisconsin)
HORSE #2

Horse Registered Name _____

Horse Owner's Name _____

Horse Owner's Address _____
(if different from exhibitor)

Premises I.D. # _____

 ATTACHED: Coggins Test Results. Date Completed: _____
(Coggins test valid for 12 months in the state of Wisconsin)
HORSE #3

Horse Registered Name _____

Horse Owner's Name _____

Horse Owner's Address _____
(if different from exhibitor)

Premises I.D. # _____

 ATTACHED: Coggins Test Results. Date Completed: _____
(Coggins test valid for 12 months in the state of Wisconsin)