

PRE-ENTRIES CLOSE  
TEN DAYS BEFORE SHOW.  
POST ETRIES WILL  
BE ACCEPTED  
THE DAY OF THE SHOW  
WITH A \$10 FEE

**DUTCHESS COUNTY FAIR  
DRAFT HORSE SHOW**

**ONE ENTRY FORM  
PER EXHIBITOR**

P.O Box 389,  
Rhinebeck, NY 12572  
(845) 876-2789  
(845) 876-4003

Make Checks Payable to:  
**Dutchess County Fair Horse Show**  
MAIL TO: Liz Tegtmeier  
DC Agricultural Society  
PO Box 389  
Rhinebeck, NY 12572

| CLASS NO. | DRIVER/HANDLER | NAME OF HORSE(S) | ENTRY FEE |
|-----------|----------------|------------------|-----------|
|           |                |                  |           |
|           |                |                  |           |
|           |                |                  |           |
|           |                |                  |           |
|           |                |                  |           |
|           |                |                  |           |
|           |                |                  |           |
|           |                |                  |           |
|           |                |                  |           |

Every entry at this Show shall constitute an agreement and affirmation that the person making it, along with the owner, lessee, trainer, manager, agent, coach, driver, rider and the horse: (1) shall be subject to the local rules of the show; (2) that every horse, rider, and/or driver is eligible as entered; (3) that the owner and any of his representatives are bound by the rules of the show and agree to hold the show, their officials, directors and employees harmless for any action taken; (4) that the owner,

rider/driver and any of their agents or representatives agree to hold the show, their officials, directors, employees and agents harmless for any injury or loss suffered during or in connection with the show, whether or not such injury or loss resulted directly or indirectly from the negligent acts or omission of said officials, directors or employees.

Signature \_\_\_\_\_

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

Social Security # \_\_\_\_\_

**FOR OFFICE USE  
COGGINS**

Vet. \_\_\_\_\_

Date \_\_\_\_\_

**RABIES**

Vet. \_\_\_\_\_

Date \_\_\_\_\_

Please include copies  
of Coggins & Rabies

Certificates with this entry form.

**DUTCHESS COUNTY FAIR  
DRAFT HORSE SHOW STALL RESERVATION FORM  
AUGUST 22-27, 2017**

**Stall Manager: Brenda Locke  
blocke9@verizon.net**

*Please fill out this stall reservation form in its entirety.  
Forms that are not filled out completely  
will be returned to the sender.*

**Draft Horse Show (8/27)**

**Arrivals permitted Saturday 8/26 after 7pm**

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

# of stalls requested \_\_\_\_\_

# of Horses to be stalled \_\_\_\_\_