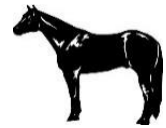




# Barron County Horse Project - Registration Form 2021



Member Name (Last, First): \_\_\_\_\_

Member Phone: \_\_\_\_\_ Member Email: \_\_\_\_\_

Parent(s): \_\_\_\_\_

Primary Address: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Secondary Address (if applicable): \_\_\_\_\_

Secondary Parent: \_\_\_\_\_

Secondary Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Member Grade (current) \_\_\_\_\_ Member Date of Birth: \_\_\_\_\_

4-H Club Enrolled in: \_\_\_\_\_

**Registration Fee Options:** Registration fee is \$75

- A) Opt out of selling sponsorship signs (pay \$75 now) \_\_\_\_\_
- B) Sell 3 sponsorship signs (@\$25 each) \_\_\_\_\_

Check # _____ Cash _____ (attach form & payment)
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**Horse Information**

1<sup>st</sup> Horse Name: \_\_\_\_\_

Ownership: \_\_\_\_\_ Family Owned \_\_\_\_\_ Leased \_\_\_\_\_ Managerial \_\_\_\_\_ Coggins Test(date)

2<sup>nd</sup> Horse Name: \_\_\_\_\_

Ownership: \_\_\_\_\_ Family Owned \_\_\_\_\_ Leased \_\_\_\_\_ Managerial \_\_\_\_\_ Coggins Test(date)

*Please list additional Horses on the back.*

As a member, member's parent/guardian or Owner of the above named Horse:

\_\_\_\_\_ I understand the above named horse will be used at Barron County Horse Project Activities

\_\_\_\_\_ I understand that the horse named above will be shown and stalled at the Barron County Fair under the guidelines of the Barron County Fair that can be viewed at [www.barroncountyfair.com](http://www.barroncountyfair.com)

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Signature (if leased): \_\_\_\_\_ Date: \_\_\_\_\_

Owner Address: \_\_\_\_\_ Phone: \_\_\_\_\_

*As parent/legal Guardian of this Horse project member, I give permission for this child to attend and participate in Barron County Horse Project Activities. I do not hold the extension staff, University of Wisconsin – Madison, Division of Extension; or training session leaders responsible for accidents arising of this program.*

*I have read and understand the 4-H Horse Project guidelines and the state 4-H horse project guidelines and understand that I am responsible for representing the Barron County 4-H Horse Project and Wisconsin 4-H program. I will abide by these specific rules and regulations.*

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# Barron County Horse Project – Horse Project Agreement



**Qualifications to show at fair:**  
*Attend one of the two Mandatory Safety Meetings*  
*Enrollment/Registration in proper group or 4-H by deadline of April 10*  
*Guidelines as stated in State 4-H Handbook*

- I understand the above requirements must be met if I intend show at the Barron County Fair. **Initial here**
- I understand that to participate in the Barron County Horse project I must attend 1 Safety Meetings prior to the fair. **Initial here.**
- I understand that if I do not fulfill these said requirements, I will be ineligible to participate in the Barron County 4-H Horse Project or exhibit my horse at the Barron County Fair. **Initial here**
- I understand it is **MY** responsibility to make sure that I submit 2 copies of each horse's coggins papers AND carry an original copy to each event/clinic/etc. **Initial here**
- **I understand there is a risk when participating in equine activities.** I AND my parent/guardian accept the risk inherent to the recreational equine activities of which the ordinary prudent person should be aware of: see Statute 8895.525

**I MUST turn in the following by April 10th** - even if I do not plan to show at the Fair:

- 4H Horse Project Agreement Page
- 4H Horse Project Registration **AND** current copy of coggins for each horse

**\*\*By signing this agreement I understand the project qualifications AND agree to follow the rules and guidelines in the Wisconsin 4-H horse guidelines.\*\***

Member name (printed): \_\_\_\_\_ Grade: \_\_\_\_\_

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent name (printed): \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_