

**2009 STATE FAIR OF VIRGINIA DRAFT HORSE AND MULE SHOW SEPT 24-25 (ENTRIES CLOSE SEPTEMBER 10)**

EXH. NUMBER	HORSE/TEAM NAME								BREED	REG. #	YR FOALED	SEX
	OWNER								SIRE		DAM	
	EXHIBITOR/HANDLER								Exh Under 18? Y N		ADDRESS (IF DIFFERENT FROM OWNER)	
CLASS NUMBER:											ENTRY FEES:	\$

**PLEASE LIST SINGLES, PAIRS, MULTIPLES SEPA-**

EXH. NUMBER	HORSE/TEAM NAME								BREED	REG. #	YR FOALED	SEX
	OWNER								SIRE		DAM	
	EXHIBITOR/HANDLER								Exh Under 18? Y N		ADDRESS (IF DIFFERENT FROM OWNER)	
CLASS NUMBER:											ENTRY FEES:	\$

**FOR ADDITIONAL HORSES/TEAMS MAKE COPIES**

EXH. NUMBER	HORSE/TEAM NAME								BREED	REG. #	YR FOALED	SEX
	OWNER								SIRE		DAM	
	EXHIBITOR/HANDLER								Exh Under 18? Y N		ADDRESS (IF DIFFERENT FROM OWNER)	
CLASS NUMBER:											ENTRY FEES:	\$

ARRIVAL TIME//DATE	DEPARTURE TIME//DATE	STABLE WITH//LOCATION
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MAIL TO:  
**STATE FAIR OF VA. DRAFT HORSE & MULE SHOW**  
 PO BOX 2585

Mechanicsville, VA 23116-2585  
 Secretary/Supt: 804/730-3668  
 Email: asdavis74@netzero.net

NUMBER OF: \_\_\_ HORSES \_\_\_ PONIES \_\_\_ MULES \_\_\_ DONKEYS

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL: \_\_\_\_\_ COUNTY \_\_\_\_\_

SIGNATURE \_\_\_\_\_ SOC. SEC. OR TAX ID# \_\_\_\_\_

*I hereby agree to abide by all rules in the prize list and hereby state that all information provided on entry blank is accurate*

<b>QTY.</b>	<b>AMT.\$</b>		
TOTAL ENTRY FEES:			
\$ _____			
STALLS @ \$20:			
_____ \$ _____			
<b>OR</b>			
GROUNDS FEE@			
\$5/ANIMAL (no stall):			
_____ \$ _____			
EXHIBITOR SALE TICKETS:			
\$10 EACH (Available only in			
advance with entries,			
maximum of 4 per owner)			
_____ \$ _____			
<table border="1"> <tr> <td><b>TOTAL ENCLOSED</b></td> </tr> <tr> <td>\$ _____</td> </tr> </table>		<b>TOTAL ENCLOSED</b>	\$ _____
<b>TOTAL ENCLOSED</b>			
\$ _____			
Make payable to			
<b>State Fair of Va.</b>			
<b>Draft Horse and Mule Show</b>			
(\$25 returned check fee)			
<b>OFFICE USE ONLY</b>			
DATE REC'D _____			
CHECK # _____			
AMOUNT _____			