Exhibitor Number:_____

2020 Sandwich Fair Horse Pulling Entry Form

Entries postmarked after September 15th or incomplete may not be accepted.

Proof of Liability Insurance must be provided for all entries.

Please Print
Name: _____Farm Name: _____SSN or EIN: _____

Mailing
Address:_____City:_____State:____ZIP:_____

Email Address: _____Phone: _____

NOTE: The State of New Hampshire will be randomly appearing and selecting animals to test.

*Please use this form to enter Horse Pulling. Fill out only those columns that apply to your event/show and mail the completed entry form to: Sandwich Fair, PO Box 161, Ctr. Sandwich, NH 03227.

I have read the rules and regulations governing Animal and Livestock Care Policy and have complied with the rules stated therein. _____(initial)

How many animals do you plan to bring? _____

How many days at the fair: Friday Saturday Sunday Monday

Chairman Name _____

Incomplete Forms will forfeit Premiums

Dept.	Class	Lot	Sex	Name	Weight	Reg#	DOB	Tattoo #