Phone: _____ Cell Phone: _____

ENTRY FORM
Open Class Horse

Name: _____ Birthdate _____

Address: _____

City: _____ State _____ Zip _____

DIVISION	CLASS	BREED	DATE OF BIRTH	NAME OF HORSE	DESCRIPTION OF ENTRY
Jr	*Halter*	*Shetland*	*mm/dd/yyyy*	*Flicka*	*Halter - Geldiing (example)*

ENTRIES ARE DUE ON OR BEFORE JULY 3rd, 2023

Mail to: Post Rock Extension District
Lincoln Office
PO Box 8
Lincoln, KS 67455-0008

Email: mjsaxton@ksu.edu