

ENTRY FORM – 4-H & Junior Activities

Complete and Mail to:
 INTERIOR PROVINCIAL EXHIBITION
 BOX 490 ARMSTRONG, B.C. V0E 1B0
 PHONE (250) 546-9406 FAX (250) 546-6181

EXHIBITION DATES – Aug. 31st – Sept. 4th, 2011
 Entries Close – Friday July 15th, 2011

www.armstrongipe.com

Name of Club _____ Name of Leader _____

Leader's Mailing Address _____ City _____ Prov _____ Postal _____

Home phone _____ Cell Phone _____ Email _____

2 Leader Wristbands Free – Thereafter \$21.40 each for Registered Leader

Payment: VISA **MASTERCARD**

Number of Animals Number of Pens/Stalls Required

Card Number _____ Expiry Date _____

I herby certify that every member is eligible as entered and subject to the rules and regulations of the Interior Provincial Exhibition and of Provincial 4-H and agree to be bound thereby.
 I further certify that we have read all instructions in the Prize List and will comply with those rules.

Dairy Leaders please have members list the **Dam & Sire** of their 4-H calves on the bottom of the 4-H Id sheets

 Signature of Leader

Junior Members - PLEASE ENTER ALL MEMBERS IN ALPHABETICAL ORDER

| Show # | Member's Name | Age as of Dec. 31/09 | Animals Birth Date | Ear Tag | Registration or Tattoo # | Yearling Registration | 2yr old Registration | Class Entry Number | Fees |
|--------|---------------|----------------------|--------------------|---------|--------------------------|-----------------------|----------------------|--------------------|------|
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Senior Members - PLEASE ENTER ALL MEMBERS IN ALPHABETICAL ORDER

| Show # | Member's Name | Age as of Dec. 31/09 | Animals Birth Date | Ear Tag | Registration or Tattoo # | Yearling Registration | 2yr old Registration | Class Entry Number | Fees |
|--------|---------------|----------------------|--------------------|---------|--------------------------|-----------------------|----------------------|--------------------|------|
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Camping- \$7.00 per day per vehicle. # WED _____ THURS _____ FRI _____ SAT _____ SUN _____
 Parking Fee - \$7.00 per Vehicles Number Required WED _____ THURS _____ FRI _____ SAT _____ SUN _____

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|------------------|--|
| Total Entry Fees | |
| Camping | |
| Park Fees | |
| Wristband Fees | |
| Total Owing | |

~OKE SWENSON MEMORIAL~

| | NAME | PROJECT #1 | PROJECT #2 | PROJECT #3 |
|----------|----------|------------|------------|------------|
| TEAM # 1 | 1. _____ | _____ | _____ | _____ |
| | 2. _____ | _____ | _____ | _____ |
| TEAM # 2 | 1. _____ | _____ | _____ | _____ |
| | 2. _____ | _____ | _____ | _____ |
| TEAM # 3 | 1. _____ | _____ | _____ | _____ |
| | 2. _____ | _____ | _____ | _____ |
| TEAM # 4 | 1. _____ | _____ | _____ | _____ |
| | 2. _____ | _____ | _____ | _____ |

WAIVER OF CLAIM: please fill out with every member's name (including Cloverbuds) and have their parent sign this form or photocopy and fill out the pee wee waiver of claim form.

We, (listed below) being the parent or legal guardian of (listed below) consent to his/her participation in the _____ at the Interior Provincial Exhibition
(Describe Event)

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
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| _____ | _____ | _____ |
| _____ | _____ | _____ |

I acknowledge that this event is potentially dangerous and involves risk of harm to the person and property of my child and in consideration of my child being accepted in the foregoing activity, I accept such risk on behalf of myself and my child absolutely and I agree that neither the Interior Provincial Exhibition Association, its Directors and Officers, the Management or Staff shall be held liable for any damages or injury sustained by my child while engaged in this activity or as a result of my child being on the Exhibition grounds for such activity. We agree to make no claim against the show or the owners of the Exhibition grounds, if any damage be occasioned to or loss occur to any equipment or animal or accident or injury to any members or handlers which will attend the show.

Name of parents (please print)

Name of child

Signature of Parent/Guardian