

# 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** - September 1<sup>st</sup> – 5<sup>th</sup>  
 Entries Close – Friday July 16<sup>th</sup>, 2010

[www.armstrongipe.com](http://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

**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

Camping- \$5.00 per day per vehicle. \_\_\_\_\_ # WED \_\_\_\_\_ THURS \_\_\_\_\_ FRI \_\_\_\_\_ SAT \_\_\_\_\_ SUN \_\_\_\_\_  
 Parking Fee - \$5.00 per Vehicles Number Required WED \_\_\_\_\_ THURS \_\_\_\_\_ FRI \_\_\_\_\_ SAT \_\_\_\_\_ SUN \_\_\_\_\_

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)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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