Licking County 4-H Horse Show Category Confirmation

* Must be turned in by April 27th – Must accompany club members' I.D. papers *

(May be changed / updated up through first show)

1st B = 1st Yr Beginner
2nd B = 2nd Yr Beginner
H = Horseless
TH = Therapeutic
TR=Training Project

Club Name: ____

Organizational Advisor Signature: ________________________________Phone Number:______________________

Name	PAS (Ohio State Fair)	Adv	Intermediate Year			1st B	2nd B	H	TH	TR	Age as of 1/1/2021	Horse's Name	Lease
			1st	2nd	3rd								