State 4-H Horse Program
Individual and Novice Entry Form

Cost: $10.00 per person for each contest –  \textit{(Make checks payable to Laurel Riders 4-H Horse Club)}

Novice contestant/participant must be registered 4-Hers under the age of 10 years by January 1, 2017.

\textbf{Separate sheets must be filled out for each contest - no check - no entry.}
Quiz Bowl & Communications- April 1 2017, Middlesex Extension Center -  \textit{Deadline for Entry - March 13, 2017}
Hippology - April 29th 2017, Storrs Campus - \textit{Deadline for Entry - April 1st, 2017}
Horse Judging - April 30th 2017, Storrs Campus - \textit{Deadline for Entry - April 1st, 2017}

Check entry times as listed on group forms.

Choices (please circle one) There is no individual Jr. QB and we reserve the right to not hold individual Sr. QB

Novice Hippology Experience  Novice Horse Judging  Novice Quiz Bowl (each person will compete individually)

Individual Senior Hippology  Individual Senior Horse Judging
Individual Junior Horse Judging  Individual Junior Hippology

\textbf{Participant}
Name: ________________________________________________________________
Address:________________________________________________________________
Birth date:_____________________________ Telephone:____________________________

\textbf{Coach}
Name: ________________________________________________________________
Address:________________________________________________________________
Telephone:_____________________________ email ________________________________

\textbf{ALL COACHES MUST BE REGISTERED 4-H VOLUNTEERS}
This will be verified through your county office!

Return completed entry forms
Emily McCabe Alger, 1066 Saybrook Road, Box 70, Haddam, CT 06438

* Forms and/ or checks arriving late will not be accepted.
* Incomplete forms will not be accepted.
* Incomplete or incorrect checks will be returned and the packet they are with will not be accepted.
* Persons listed as coaches who are not registered volunteers will have their forms returned and their packets will not be accepted.
Communications and Horsebowl Day

LUNCH PARTICIPATION SHEET

10:00 a.m. - Communications   1:00 p.m. Horse Bowl
April 1st 2017
Middlesex County Extension Center

We will be hosting pizza for the communications and horse bowl participants at approximately noon on April 1. We need to have an idea of how many people will be in attendance so we can make sure enough food is ordered! Please indicate below if your group will be attending and how many people will be in your group.

COMMUNICATIONS ATTENDANCE is STRONGLY ENCOURAGED – why not come and support our communications participants and learn a little something while you wait on pizza lunch?

Group Name: ______________________________________________

Group leader: ______________________________________________

Group Leader Cell Phone: _______________________________

Approximate arrival time: _______________________________

Number of youth eating pizza: __________
Number of Adults eating pizza __________

Members with special dietary needs will please need to bring along food that works for them. Haddam is a very rural area and dining options are limited. Please let your participants know!!!
4-H Horse Program Hippology Contest
8:30 a.m. April 29th, 2017
Storrs Campus

Team Entry Form

County ________________________ Team Number ____________

Entry Fee: $10.00 per contestant
(Make checks payable to Laurel Riders 4-H Horse Club)

Team Members:

1. Name: ___________________________   Email______________________________
   Address: ___________________________________________________________________
   Birth Date: ________________      Telephone: __________________________

2. Name: ___________________________   Email______________________________
   Address: ___________________________________________________________________
   Birth Date: ________________      Telephone: __________________________

3. Name: ___________________________   Email______________________________
   Address: ___________________________________________________________________
   Birth Date: ________________      Telephone: __________________________

4. Name: ___________________________   Email______________________________
   Address: ___________________________________________________________________
   Birth Date: ________________      Telephone: __________________________

Coach:
Name: ___________________________   Telephone: __________________________
Address: ___________________________________________________________________
Email______________________________

**Mandatory for Senior Teams Only**
Name of Assistant Coach or Chaperone (in case you are going to KY)

**Chaperone

Full Name ___________________________ County Registered ______________

All COACHES/Chaperones MUST BE REGISTERED 4-H VOLUNTEERS – this will be verified through your county office

Return completed entry forms postmarked by April 1st, 2017
Emily McCabe Alger, 1066 Saybrook Road, Box 70, Haddam, CT 06438

*Forms and/ or checks arriving late will not be accepted. *Incomplete forms will not be accepted or combined in office.
*Incomplete or incorrect checks will be returned and the packet they are with will not be accepted.
*Persons listed as coaches/ chaperones who are not registered volunteers will have their forms returned & their packets will not be accepted.

Junior and Senior teams may have 3 members
State Horse Judging Contest  
8:30 a.m. April 30th, 2017  
Storrs Campus  
(Make checks payable to Laurel Riders 4-H Horse Club)

Team Entry Form  

Jr. Sr. (Circle one)  

County __________________________ Team Number __________________________

Team Members:

1  Name: _________________________________________ Email________________________
   Address: __________________________________________________________________
   Birth Date: ______________ Telephone: ________________________________

2  Name: _________________________________________ Email________________________
   Address: __________________________________________________________________
   Birth Date: ______________ Telephone: ________________________________

3  Name: _________________________________________ Email________________________
   Address: __________________________________________________________________
   Birth Date: ______________ Telephone: ________________________________

4  Name: _________________________________________ Email________________________
   Address: __________________________________________________________________
   Birth Date: ______________ Telephone: ________________________________

Coach:

Name: ___________________________ Telephone: ____________________________
   Address: __________________________________________________________________
   Email________________________

All COACHES/Chaperones MUST BE REGISTERED 4-H VOLUNTEERS – this will be verified through your county office

Return completed entry forms postmarked by April 1st, 2017
Emily McCabe Alger, 1066 Saybrook Road, Box 70, Haddam, CT 06438

* Forms and/or checks arriving late will not be accepted.  
* Incomplete forms will not be accepted or combined in office.
* Incomplete or incorrect checks will be returned and the packet they are with will not be accepted.
* Persons listed as coaches/ chaperones who are not registered volunteers will have their forms returned & their packets will not be accepted.

Junior and Senior teams may have 3 members
4-H Horse Program Horsebowl Contest
1:00 p.m. April 1st 2017
Middlesex County Extension Center

Team Entry Form

**County** ___________________  **Team Number** ________________

Entry Fee: $10.00 per contestant
(Make checks payable to Laurel Riders 4-H Horse Club)

Team Members:

1. Name: ___________________________________________  Email: _________________________________
   Address: ________________________________________________________________________________
   Birth Date: ________________      Telephone: _________________________________

2. Name: ___________________________________________  Email: _________________________________
   Address: ________________________________________________________________________________
   Birth Date: ________________      Telephone: _________________________________

3. Name: ___________________________________________  Email: _________________________________
   Address: ________________________________________________________________________________
   Birth Date: ________________      Telephone: _________________________________

4. Name: ___________________________________________  Email: _________________________________
   Address: ________________________________________________________________________________
   Birth Date: ________________      Telephone: _________________________________

Coach:
Name: ___________________________  Telephone: ____________________________
Address: ________________________________________________________________________________
Email: ________________________________________________________________________________

**Mandatory for Senior Teams Only**  Name of Assistant Coach or Chaperone (in case you are going to KY)

**Chaperone**

Full Name ___________________  County Registered ___________________

All COACHES/Chaperones MUST BE REGISTERED 4-H VOLUNTEERS – this will be verified through your county office

Return completed entry forms postmarked by March 13, 2017
Emily McCabe Alger, 1066 Saybrook Road, Box 70, Haddam, CT 06438

*Forms and/ or checks arriving late will not be accepted.  *Incomplete forms will not be accepted or combined in office.
*Incomplete or incorrect checks will be returned and the packet they are with will not be accepted.
*Persons listed as coaches/ chaperones who are not registered volunteers will have their forms returned & their packets will not be accepted.

** Juniors may have 3 members Senior teams must have 4 members **
State 4-H Horse Senior Individual Demonstration Contest
Saturday April 1, 2017
Middlesex County Extension Center, Haddam
Check in - 10:00 am

Individual Entry Form
(Seniors only)

County__________________________

Entry Fee: FREE for 2017

Name: ______________________________________________________________________

Address: ____________________________________________________________________

Birth Date: _______________________ Telephone: ________________________________

Email address: ________________________________________________________________

Demonstration Title: ____________________________________________________________ (MANDATORY for program)

Coach:
Name: ______________________________ Telephone: ______________________________

Address: ____________________________________________________________________

Email address: __________________________________________________________________

Return completed entry forms by 3/13/17 to:
Emily McCabe Alger, 1066 Saybrook Road, Box 70, Haddam, CT 06438

* Forms and/ or checks arriving late will not be accepted.  *
*Incomplete forms will not be accepted.  *
State 4-H Horse Team Demonstration Contest
Saturday April 1, 2017
Middlesex County Extension Center, Haddam
Check in – 10:00 am

Team Entry Form

County _______________________________ Team Number__________

Entry Fee: FREE for 2017

Team Members:

1. Name: ______________________________________________________________________
   Address: ______________________________________________________________________
   Birth Date: ____________________________   Telephone: _____________________________
   Email address: ______________________________________________________________________

1. Name: ______________________________________________________________________
   Address: ______________________________________________________________________
   Birth Date: ____________________________   Telephone: _____________________________
   Email address: ______________________________________________________________________

Demonstration Title: ________________________________________________________________ (MANDATORY for program)

Coach:
Name: ________________________________   Telephone: _________________________________
Address: ______________________________________________________________________
Email address: ______________________________________________________________________

Return completed entry forms by 3/13/17 to:
Emily McCabe Alger, 1066 Saybrook Road, Box 70, Haddam, CT 06438

*Forms and/ or checks arriving late will not be accepted.  *Incomplete forms will not be accepted.
State 4-H Horse Public Speaking Contest  
Saturday April 1, 2017  
Middlesex County Extension Center, Haddam  
Check in – 10:00 am

Entry Form

Nov.  Jr.  Sr.  
(Circle one)

County ____________________________

Entry Fee: **FREE for 2015**

Name: ________________________________
Address: ________________________________
Birth Date: ____________________________  Telephone: _____________________________
Email address: ____________________________

Speech Title: ____________________________  (MANDATORY for program)

Coach:
Name: ________________________________  Telephone: _____________________________
Address: ________________________________
Email address: ____________________________

*Return completed entry forms by 3/13/17 to:  
Emily McCabe Alger, 1066 Saybrook Road, Box 70, Haddam, CT 06438*

*Forms and/ or checks arriving late will not be accepted.  
*Incomplete forms will not be accepted.*