

## YOUTH FORM

## This form MUST be accompanied by the 4-H PIE FORM

Participant's Name:		4-H Age (as of January 1 <sup>st</sup> , 2024):	
Birth Year: Phone N	lumber:	Email:	
County:	Agent's Name(s):		
Have you attended this camp before? Circle one: YES NO If yes, how many years:			
Participant's Shirt Size (circle one): YM YL AS AM AL XL Other:			
HORSE DIVISION INFORMATION Which division do you wish to participate?			
-Walking/Racking/Mountain	-Hunter	-Speed	-Horse Lovers (horseless)
-Western Pleasure	-Mini	-Ranch	
What is your level of experience (circle	one): Beginner	Intermediate	Advanced
Do you plan to bring horses to the horse camp (circle one)?			
YES – how many horses	N	0 – I will be participating in	the Horseless Division
*There is an additional fee per horse for 2 or more horses.			
Please list any bad habits or issues your horse/horses have in which you are bringing to camp:			
Name of <b>parent/guardian</b> OR <b>responsible adult</b> who will be attending camp with the 4-Her(s):			
First & Last Name:	Со	ntact number:	
First & Last Name:		Contact number:	
First & Last Name:		Contact number:	

All the information provided above is accurate to my best knowledge.

As a parent/guardian, I have read, understand, and have signed the rules and guidelines required of the Bluegrass 4-H Horse Council and the Bluegrass 4-H Horse Camp. I have also reviewed these rules and guidelines with my 4-Her(s). I understand there are consequences if myself or my 4-Her(s) do not abide by these rules.

Parent/Guardian Signature

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Disabilities accommodated with prior notification.

LEXINGTON, KY 40546