

# 2018 Overnight Clinic Entry Form

Exhibitor's Name \_\_\_\_\_ Name of Horse \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone# \_\_\_\_\_

Emergency Name \_\_\_\_\_ Phone # \_\_\_\_\_



Fee \$25.00 by July 13 or \$30.00 after July 13th  
Make checks Payable to: **Sheboygan County H&P Project**

Send Entries to:  
*Angie Albrecht*  
*N2918 Sunset Dr*  
*Oostburg, WI 53070*

**Starting 4pm Saturday July 21<sup>st</sup> till 4pm Sunday July 22<sup>nd</sup>.**  
**Clinics with certified clinicians, crafts, games, and more.**

Includes: Saturday Supper and Sunday breakfast and lunch.

**DO NOT NEED TO BRING A HORSE TO  
PARTICIPATE**

Emergency info:

Doctor: \_\_\_\_\_ Phone # \_\_\_\_\_

Hospital: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medications: \_\_\_\_\_

Restrictions: \_\_\_\_\_

Vet: \_\_\_\_\_ phone # \_\_\_\_\_

Questions call Angie Albrecht 920-226-1709 or Kristin Shepherd 920-207-6274

It is agreed that I am entering this clinic at my own risk and will not hold the Sheboygan  
County Horse & Pony Project responsible for any accident, injury, or damage  
to my horse, my equipment, or myself.

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Parent signature