

Sheboygan County Horse & Pony Emergency Information

(To be turned in to the office when you check in for fair)

Stall Number: _____
Upper Barn or Lower Barn

Exhibitor Name: _____

4-H Club _____ **Project Leader:** _____

#1 Emergency Contact: _____

Phone# _____

#2 Emergency Contact: _____

Phone # _____

Veterinarian: _____

Veterinarian Phone # _____

Farrier: _____

Farrier # _____

Horses Name: _____

Physical Description: _____

Pulse: _____ **Respiratory:** _____ **Weight:** _____

Hands: _____ **Sex:** _____ **Age:** _____

Vices/Anything we need to know: _____

AM Feed: _____

PM Feed: _____

Any Overnight Concerns that volunteers should be aware of:
