

**PERMISSION TO PARTICIPATE IN 4-H HORSE ACTIVITIES  
DISCLOSURE AND RELEASE OF CLAIMS**

Signed: \_\_\_\_\_  
(4-H Member)

Date \_\_\_\_\_

Signed: \_\_\_\_\_  
(Parent or Guardian)

Date \_\_\_\_\_

*This form needs to be signed and on file for each youth participant in any 4-H horse program activity. The form needs to be signed each year and before a youth participates in the Ohio 4-H Horse Program Activities.*

*Under Ohio law, Section 2305.321 of the Revised Code, an equine activity sponsor, professional, volunteer, participant or other person is not liable for an injury to or the death of a participant in the equine activities resulting from the inherent risks of equine activities.*

I, \_\_\_\_\_, have chosen to participate in the Ohio 4-H Horse Program and its related horse activities. I understand that this participation will involve contact with horses and may give rise to a risk of physical injury.

I am aware that:

- A. Horses have a tendency to behave in ways which may result in injury, death, or loss to riders, or other persons in the immediate vicinity;
- B. Horses may react in an unpredictable way to sounds, sudden movement, unfamiliar objects, persons, or other animals;
- C. Riding a horse may give rise to a risk of injury from hazards arising from the surface or subsurface of the ground in which these riding activities occur;
- D. While in the vicinity of a horse or while riding a horse, I may be involved in a collision with another horse, another animal, a person, or an object;
- E. Other participants in the program may fail to maintain control over a horse or fail to act within their abilities, thus causing harm to me or other participants; and
- F. Other participants in the program may act in a negligent manner, which could result in harm to me.

As parent or guardian I have discussed with my child the need to behave in a safe manner. I will make sure that my child wears appropriate clothing and footwear during horse activities. I further agree that my child shall be subject to the helmet policy.

In consideration for the opportunity to participate in club, county, district and state 4-H horse activities and the use of services and facilities made available through these 4-H horse activities, I do release and forever discharge for myself and my heirs, executors, administrators, and assigns, the Ohio 4-H Horse Program professional and volunteer leaders, agents, The Ohio State University and its Board of Trustees, its administrators, faculty and staff, from all claims, demands, and causes of action for personal injury or any other damage which may arise out of or be in any way related to my participation in this activity or program.

I understand that my child is not required to participate in any horse activity, but grant permission for him/her to do so, despite the possible risks. I recognize that by participating in these activities, as with any physical activity, my child may risk personal injury. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in these activities, and that I assume any expense that may be incurred in the event of an accident, illness, or other incapacity, regardless of whether I have authorized such expenses. As a parent/guardian, I assume the same risk for myself, and other family members and friends present at these horse activities.

**Return to your local OSU Extension, 4-H Program Office**  
By: *June 1st*

**4-H Equine Mandatory Helmet Use Policy**

All youth 19 years and under, participating in any 4-H equestrian activity, are required to wear properly fitted protective headgear which meets or exceeds current ASTM (American Society for Testing and Materials)/SEI (Safety Equipment Institute) standards with the chin harness securely fastened at all times while riding or driving an equine. It is the responsibility of the rider, or the parent or guardian of the youth participant, to make sure that the headgear worn complies with appropriate safety standards for protective headgear intended for equestrian use, and is properly fitted and in good condition. The Ohio 4-H Horse Program, Show Committees, Officials, Extension Personnel and Volunteer Leaders are not responsible for checking headgear worn for such compliance. The Ohio 4-H Horse Program, Show Committees, Officials, Extension Personnel and Volunteer Leaders make no representation or warranty, expressed or implied, about any protective headgear, and cautions riders that death or serious injury may result despite wearing such headgear, as no helmet can protect against all foreseeable injuries in equestrian activities. The Ohio 4-H Horse Program, Show Committees, Officials, Judges, Extension Personnel and Volunteer Leaders may, at his/her discretion, check a participant's protective headgear for proper standards. If the youth is found to be wearing unapproved, defective, or improperly fitted headgear, he/she will not be permitted to participate in riding or driving activities until proper headgear is acquired.



# HORSE'S IDENTIFICATION FORM

4-Her's Name \_\_\_\_\_ County \_\_\_\_\_

Horse's Name \_\_\_\_\_ 4-H Club Name \_\_\_\_\_

Horse \_\_\_\_\_ Pony \_\_\_\_\_ Height \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

Breed or Type (saddle, hunter, stock) \_\_\_\_\_

Basic Color \_\_\_\_\_ Face and Leg Markings \_\_\_\_\_

On Diagram Below, **OUTLINE** with Dark Solid Lines  
**ALL** White Markings.  
 Show **ALL** SCARS and BRANDS.

Check if leased horse

DRAW IN HEAD MARKINGS

**Right Side View**

R Hind Legs L L Fore Legs R

DRAW IN EVERY WHITE AREA

**Left Side View**

L Fore Legs R R Hind Legs L

**Rear View**

L Hind Legs R L Fore Legs R

INDICATE ALL DARK SPOTS WITHIN WHITE AREAS

**Front View**

R Fore Legs L R Hind Legs L

**Noble County Junior Fair Horse Statement of Understanding**  
**\*\*Complete ONE Form per HORSE**

Together with my club advisor, I have read the policies and guidelines of the Noble County Junior Fair Horse program and understand my responsibilities and obligations as a participant and a member of 4-H/FFA. I understand that I will follow these guidelines as they pertain to my 4-H/FFA horse project, exhibition at the Noble County Junior Fair and competition at the Ohio State Fair Horse Show.

I understand that I must be enrolled in the Noble County 4-H program or the FFA program through my school district as of April 1 of the year in which I wish to compete in the Noble County Junior Fair and the Ohio State Fair. I have read and understand rules that apply to project selection, State Fair Horse show tryouts and participation in 4-H horse activities and/or Junior Fair Horse Show.

By signing below, I agree to abide by these rules and policies, and will agree to any decision made by the Noble County 4-H Horse Council and/or Noble County Agricultural Society. I have included any lease agreements or documentation for my horse project as applicable.

Name \_\_\_\_\_ Parent(s) or Guardian \_\_\_\_\_  
(signature) (if minor) (signature)

4-H Club Advisor \_\_\_\_\_ FFA Advisor \_\_\_\_\_  
(signature) (signature)

Horse Name \_\_\_\_\_ Name of Horse Owner \_\_\_\_\_

\_\_\_\_\_ Check if this is a leased horse. Attach a copy of the lease agreement

Age of Horse: \_\_\_\_\_ Sex: \_\_\_\_\_

Check: \_\_\_\_\_ Horse \_\_\_\_\_ Pony \_\_\_\_\_ Miniature \_\_\_\_\_ Draft

\_\_\_\_\_ Check if this is the Primary Horse that will be used for Ohio State Fair Exhibition

Circle: **Primary Horse** **Alternate Horse**

**Check what this horse will be participating in. \*\*only one horse can be exhibited in each class**

\_\_\_\_\_ Western \_\_\_\_\_ English \_\_\_\_\_ Contesting \_\_\_\_\_ Ranch \_\_\_\_\_ Cart

Check the project you are taking with this horse:

_____ 173 Beginning Horse Management	_____ 182 Equine Nutrition
_____ 175 Light Horse Selection	_____ 185 Equine Reproduction/Genetics
_____ 177 Basic Horse Training	_____ 188 Trail Riding
_____ 181 Draft Horse	_____ FFA Project

Date Signed and Completed \_\_\_\_\_

**\*\* Attach a photo of the Project Horse**

**Return one copy to Extension Office by June 1<sup>st</sup>.**

**Noble County Junior Fair Horse Vaccination Record**

**DUE - August 12, 2022**

Horse Name \_\_\_\_\_

Name of Exhibitor \_\_\_\_\_

Name of Horse Owner \_\_\_\_\_

\_\_\_\_\_ Check if this is a leased horse

Age of Horse: \_\_\_\_\_ Sex: \_\_\_\_\_

Check: \_\_\_\_\_ Horse \_\_\_\_\_ Pony \_\_\_\_\_ Miniature \_\_\_\_\_ Draft

Attach current vaccination record from a Licensed Veterinarian or a receipt for the purchased vaccines.

Required vaccinations are equine influenza and tetanus. Certification for Coggins test is not required.