

# King County Fair 2011

## Stall Emergency Card

Horse's Name: \_\_\_\_\_  
Exhibitor's Name: \_\_\_\_\_  
4-H Club: \_\_\_\_\_  
Preferred Vet's Name: \_\_\_\_\_  
Preferred Vet's Number: \_\_\_\_\_  
Date of Last Vaccinations: \_\_\_\_\_  
Any Known Health Problems: \_\_\_\_\_  
Type of Feed: \_\_\_\_\_  
Vices (i.e. kicking, biting, cribbing): \_\_\_\_\_

## Emergency Contact Information

Name of Responsible Party: \_\_\_\_\_  
Home phone number: \_\_\_\_\_  
Cell or best number to call during Fair: \_\_\_\_\_  
Where will you be staying during Fair?      **Camperville**      **Motel**      **Home**  
    If Camperville, describe Trailer or Tent: \_\_\_\_\_  
    If Motel, motel name and number: \_\_\_\_\_  
Alternate contact name: \_\_\_\_\_  
Alternate contact number: \_\_\_\_\_  
Additional contact name: \_\_\_\_\_  
Additional contact number: \_\_\_\_\_

I understand and acknowledge that KC Fair horse barn volunteers will make every attempt to contact the undersigned before seeking emergency veterinary care for my horse.

If I, or other responsible parties listed as emergency contacts are unreachable, then barn management will proceed with the option I indicate below:

**Financially responsible person must circle and sign the option of their choosing.**

A.) Barn Management will contact the veterinarian of my choice & if that vet is not available to respond, then any other available veterinarian may be called in. I understand, and agree that I am the financially responsible party.

**X**

B.) Only call the veterinarian of my choice. I understand, and agree that I am the financially responsible party.

**X**

C.) Other Options:

**(Please Note Specifics Below)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**X**

Note: If you are not the legal owner of the horse you are showing at KC Fair, then you should attach a release from the animal's owner.