

HORSE PLOWING ENTRY FORM

Name: _____ Date of Birth: _____

Address: _____

Telephone: _____ E-mail: _____

Emergency Contact: _____ Cell Phone: _____

County of Branch Membership _____ CLASS: _____ GROUP: _____

Number of Years You Have Been Plowing in Competition: _____

RULES & REGULATIONS BOOK

Please read the Rules & Regulations Book for all of the Plowing Competition Rules & Regulations in 2019.

QUALIFYING POINTS

This is to certify that I have received the minimum number of points as stated in Rule 1 of the 2019 Rules & Regulations Book.

a) Highest Points for 2018 or 2019: _____ received at _____ Branch Match

Please include a copy of the Branch Match Points form from the Branch you received the points.

Branch Secretary Signature: _____

OR

b) Points from the 2018 International Plowing Match & Rural Expo: _____

INSURANCE

Please enclose a copy of your certificate of insurance, signed by a company representative and showing \$2 million liability coverage, expiry date and the Ontario Plowmen's Association named as an additional insured.

If you are borrowing equipment for the competition, please provide the following:

Name of Owner: _____ Phone # of Owner: _____

****Mandatory: Please send in a Certificate of Insurance with your entry form.**

HORSES & ACCOMODATIONS

Equine Accommodations are to be confirmed, and details will follow.

Number of Horses attending the IPM: _____

Where will you be staying during the IPM? Please circle one: Hotel RV Park Horse Park

Do you have a camper that will require a hookup? Yes ___ No ___ (Please bring an extension cord.)

PRACTICE FIELDS

As per Rules & Regulations Book (page 19) – Practice Plowing will be held on Monday September 16th, 2019 only.

****Note:** All of the Practice Land must be totally plowed.

In order to calculate the number of lands that will be needed for plowing and practice lands we need to know if you will require practice land. Please check off whether or not you require practice land: Yes No

BBQ

A BBQ will be held on Wednesday, Sept 18th for all Horse Plowmen. Two tickets per team will be given and extra tickets will be available upon arrival at the Horse Park. If you will require extra tickets, approximately how many? _____

BARBARA MCALLISTER MEMORIAL SCHOLARSHIP

Are you interested in the Plowing Scholarship?

Yes

No

*** Please contact your County Secretary to complete the Scholarship Forms and send them to the OPA Office. *** All forms must be sent to the OPA Office (the form the secretary completes as well as the forms that you complete)

QUEEN OF THE FURROW

Are you interested in coaching a Queen of the Furrow?

Yes

No

Are you committed to a specific Queen of the Furrow?

Yes

No

If so, what county and the name of the Queen _____

PRIVACY WAIVER

The OPA maintains a database of participants annually in order to keep all interested individuals up to date on activities of the OPA and the IPM including Matches, special events, programs, services and the delivery of prize money. Photos taken at OPA and IPM events may be used to promote OPA, IPM and other special events through the OPA website and other promotional materials.

By participating in this event you are consenting to allow your name, town, placing and points to be listed on the website. This information will not be sold or made available outside of the OPA. For further information or to have specific names removed from our database, please contact our Privacy Compliance Officer via the information above or at events@plowingmatch.org.

I _____ hereby give permission to allow the OPA to maintain my/my son's/my daughter's contact information within their internal database and to publish photos of myself/my son/my daughter along with a listing of points earned at the Match.

Signature of Competitor or Parent/Guardian
If Competitor is under 18 years of age

Date

ENTRY FEE/DEADLINE

An entry fee of \$70.00 must accompany the entry form. All entries must be postmarked by August 15, 2019. Cheques should be made payable to the Ontario Plowmen's Association – NSF cheques will incur a charge of \$25

If paying by credit card: Visa / Master Card _____

Expiry Date: _____

3 Security Numbers on Back of Card: _____

If you require a receipt, please check here:

Yes

No

CHECKLIST

Certificate of Insurance Enclosed

Entry Fee enclosed

Entry Form completed – full mailing address

Practice lot requested

Plowing Competition Waiver

Scholarship application completed – if applicable

Accommodations confirmed

Any questions, please don't hesitate to contact the OPA Office –
(519) 767-2928 or 1-800-661-7569 plowing@plowingmatch.org

Please mail forms and payment by August 15th to:
Ontario Plowmen's Association, 188 Nicklin Road, Guelph, ON N1H 7L5