Permit # will be issued					
when work in kind and insurance are in order Check box after date/s are cleared with LBHA	LBHA 4-H ARENA/TRAYLOR RANCH REQUEST FORM Mail completed form to: LBHA P.O. Box 2326 Loomis CA 95650				
4-H Group:					
Name-Adult perso	on to Contact):				
Address:					
	intyor				
Phone:	Phone:Type of Meeting:				
Date(s) Needed- in	nclude time frame:				
Check one:	10% fee (profit events/horseshows, clinics etc) OR				
	Work in Kind(to be done prior to event) Date & Time work to be done:				
be on file at the 4-H Off cleared with <u>LBHA and t</u>	n must be signed by the 4-H office prior to being submitted to LBHA. Your event mustice. All events are to be for 4-H members only. Any changes to your dates must be the 4-H office, the 4-H Office will send out a change letter to LBHA. If this form is NO be there will be no event. NO EXCEPTIONS.				

AS 4-H leader of the above 4-H group, I understand that I am responsible for keeping the area around the arena neat and clean, and that all manure is removed from the asphalt. All gates and water valves that are opened must be locked or turned off before leaving for the day. I will insure that an ADULT will be present until the last 4-H member has left. Report all accidents to any individual, and/or damage to the arena or equipment belonging to LBHA.

For INFO/QUESTIONS or to report Accidents or Damage call KATHY at 652-5204 lbha@vfr.net

4-H LEADER		
Date:		

4HArena.doc 1/12