DRAFT HORSE FARM DAY ENTRY FORM

(Please use mailing address)

Name _____ Social Security # _____

Street _____ Tel. No _____

Town, State, Zip _____ Exhibitor #_____

Email_____Birth Date_____

CLASS	BREED/DIVISION	OWNER	DRIVER

PLEASE NOTE: OUR ANNOUNCER WOULD LIKE INFORMATION ABOUT OWNER, FARM, & HORSES
PLEASE ATTACH SEPARATE SHEET

CAMPER FEE: $20.00 per camper (under 20' in length- no slide outs) per night.
$30.00 per camper (with slide-outs and/or over 20' in length) per night.

I will need _____ camper space(s) on the following night(s).

Electricity and water provided if possible but not guaranteed.

_____ **Tuesday (October 6, 2026)** _____ **Wednesday (October 7, 2026)**

Contact Brenda Orlando at (978) 697-9064 or TFDrafthorse@gmail.com for details.

Entry Forms Due: Friday, September 4, 2026

Make checks payable to: TOPSFIELD FAIR
Mail entry form and fees to: Topsfield Fair, P.O. Box 134, Topsfield, MA 01983