4-H 836 h&p
Rev. 1/08

4-H HORSE & PONY AFFIDAVIT[1]

2009

Indiana State Fair
1202 East 38th Street
Indianapolis, IN 46205-2869

Completed forms will be collected at the State Fair if your animal is selected for drug testing. Do NOT send this form in with your State Fair entry form.

I hereby certify that:

1. My 4-H horse or pony has been in my continuous care since the date printed on the 4-H Enrollment and Entry Form.
2. The exhibitor and the exhibitor's parents and/or legal guardians agree that they are the people absolutely responsible for the care and custody of their animals in preparation for and while at the Indiana State Fair; including, but not limited to, policies regarding drug use and animal well being.
3. My submission of a 4-H entry expressly binds me to all terms and conditions contained in any and all parts of the Indiana State Fair 4-H/FFA Handbook/Premium List, to include, but not limited to, consent to drug and steroid tests as a condition of entering the Indiana State Fair.

Check and complete information requested for either (a) or (b) below.

(a) My State Fair 4-H animal _____
(animal identification name or number)
has not received any drug(s), steroid(s), or other medication(s), within the past thirty (30) days.

(b) My State Fair 4-H animal _____
(animal identification name or number)
has received the following drug(s), steroid(s), or other medication(s), within the past thirty (30) days.

Below is a complete list of all drug(s), steroid(s), and/or medication(s) given to my animal within the past thirty (30) days; and the date of treatment. If you are using over the counter medication, it should be listed on this form. Check with your veterinarian to make sure those medications do not violate the Indiana State Fair drug policy.

_____ _____

_____ _____

Violation of Indiana Health Requirements for the exhibition of domestic animals, is punishable under Indiana law. (code 15-2.1-21-9)

I swear or affirm under the penalties of perjury[3][4] that I have read, understand, and accept the above statements to be true, accurate, and complete.

_____ _____

Parent/Guardian Signature *Date* *4-H Exhibitor Signature* *Date*

OATH[5]

Before me, _____ a Notary Public in and for _____ County, State of Indiana, personally appeared _____ and he being first duly sworn by me upon his oath, says that the facts alleged in the foregoing instrument are true.

(Signed) _____ My commission expires: _____

Print your name _____ County in which you reside: _____

(SEAL)

1. Affidavit - a written statement of fact which is sworn to as the truth before an authorized officer.
2. (code 15-2.1-21-9) - A person who knowingly or intentionally violates or fails to comply with this article commits a Class D Felony.[6]
3. Perjury - knowingly making a false material statement under oath or affirmation. In Indiana, a person who commits perjury commits a Class D felony[6], which may be punishable by imprisonment, fine or restitution. (Indiana Code 35-44-2-1 and 35-50-2-7).
4. Prosecution for violations of Indiana law will be referred to the proper authorities.
5. Oath - An affirmation of truth of a statement before an authorized person.
6. Felony - A crime of graver or more serious nature than those designated as misdemeanors.

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