

**Kentucky State Fair
2017 Payment & Pay Winnings To
Information Form**

Kentucky State Fair
PO Box 37130
Louisville, KY 40233
(502) 367-5300 – Fax (502) 367-5305

Shipping Address
KEC Horse Show Office
937 Phillips Lane
Louisville, KY 40209

Please Print Clearly

Premium Check Goes To _____

Address _____

City _____ State _____, Zip Code _____

Phone _____ E-Mail _____

Signature _____

(By signing as pay premium to you assume all responsibility for owner and rider)

Social Security Number or Federal ID Number _____

(Required for Premium Purposes)

IF THIS FORM IS NOT FILLED OUT, NO PREMIUM CHECK WILL BE CUT FOR THE ENTRY!

Payment

Exhibitor names that are included in this payment: _____

() Check or Money Order, Check # _____ Make checks payable to **KSF QH Show**

() CASH- only available at show () Visa () MasterCard () Discover () American Express

Card Number _____

3 or 4 digit CVC # _____ Expiration Date _____

Cardholder Name _____

(Please Print)

Billing Address _____

Address _____

City _____ State _____, Zip Code _____

E-Mail _____

Phone _____

Cardholder Signature _____

Total: \$ _____

As stated in the entry application, the Kentucky State Fair Board (KSFB) requires personally identifiable information, including a social security number, for process of entry applications and payment. The KSFB shall only have access to compile information that is voluntarily provided by applicants on the entry application form. The KSFB gives its assurances that it will not sell, share, exchange or otherwise provide information obtained from the entry application form to any person, entity or third party outside of the KSFB. Only those authorized KSFB employees will have access to the entry application forms for business purposes (process of entry applications and payment). Further, the computer server on which entry application forms are maintained remains secure at all times.