

NORTH FLORIDA FAIR ENTRY FORM FOR LIVESTOCK

Make Premium Check Payable to: NAME: John Smith TELEPHONE: (850) 222-222

ADDRESS: 123 Somewhere Road CITY & STATE: Our Town, FL ZIP CODE: 32300 COUNTY: Leon

ADULT ___ YOUTH X AGE: 10 GRADE: 5 4H X FFA ___ JR X ITM ___ SR ___

DEADLINE IS OCTOBER 1ST! (Late fee will be applied after this date)

Use this entry form for livestock entries. All other entries use other entry form. **USE A SEPARATE FORM FOR EACH DEPARTMENT, including livestock entered in different departments.** Entry forms may be reproduced. **Incomplete entry forms will be returned to the exhibitor.** See Fair On-line Premium Book for entry deadlines and rules for each department. **PLEASE PRINT using BLUE/BLACK INK ONLY!** Mail completed form(s) to the North Florida Fair Association, 441 Paul Russell Road, Tallahassee, FL 32301. **Faxed forms will not be accepted.** If you have any questions call (850) 878-3247. **All 4H Dairy Show entries should be mailed directly to the Chairperson, see Department rules for address. All checks for premium monies awarded in connection with the Fair shall be negotiated by the recipient/payee within 90 days from the date of the check, time being of essence. If the recipient/payee fails to timely negotiate said check, all monies due recipient/payee shall belong to the Fair and the recipient/payee shall be deemed to have made an unconditional and irrevocable gift of said monies to the Fair.** Please accept the following entries subject to the rules and regulations of the Fair Premium Book by which I agree to be governed in exhibiting. I also agree to abide by the IAFE (International Association of Fairs and Expositions) National Code of Show Ring Ethics as stated in the premium list of this Fair. A copy may be obtained on request from the North Florida Fair. All statements with said entries are true. It is specifically agreed that I will not remove any of my entries from stall or pen spaces assigned me before the official release time as published in the On-line Premium Book.

SIGNED: _____ DATE: 5/5/10 # OF ANIMALS ENTERED: 2 ENTRY FEE ENCLOSED: \$ 16 (if applicable)
 (Your Name as Owner or Agent) **(Entry Fee must accompany entry form - over payments will NOT be refunded)**

SIGNED: _____ SIGNED: _____
 (Parent or Guardian Signature) (VoAg or County Extension Agent)

DEPT	DIV	CLASS	Name of Animal to be Exhibited	SEX	DOB	Register # Herd or Stud Book	Tag/Tattoo Number	ADGA ID # /BOER ID # (Goats only)	Name of Owner/Exhibitor	Fair Use Only
150	D	2	Missy	F	1/10 /10	1234567	A123		John Smith	
Use	F	5	Belle	F	9/2/ 10	2345678	B123		John Smith	
separate										
form										
for each										
dept.										
Forms										
may be										
copied.										

Please make sure that Dept., Division and Class are entered clearly on this form