

MARKET STEER ENTRY FORM -- 2016 BAKER COUNTY FAIR



Exhibitor Information

Name: _____ Age on 10/1/16: _____ Grade _____
 Address: _____
 City/ST: _____ Zip: _____
 Phone: _____
 Email: _____
 Circle One: Sr FFA Middle FFA 4H

Completed forms must be turned in at initial weigh-in date of June 25, 2016

(Gray boxes to be completed by Fair)

Breed of Steer	Animal's Name	Birth Date	Breeder (farm where born)	Ear Tag #	Beg Weight	End Weight

By signing below, I/We hereby certify that the above information is true and accurate. I/We further certify that any drug antibiotic, wormer or biological substance which may have already been, or that will be, administered by myself, or any other person, was/will be done in strict compliance with the manufacturer's label requirements, and any applicable withdrawal times will be strictly adhered to before steer is returned to the fair. I/We also agree that I/we have read, and agree to, the rules and regulations published in the fairbook.

 Exhibitor's Signature

 Date

 Parent/Guardian Signature
(if Exhibitor is under age 18)

 Date

 Chapter Advisor or Club Leader Signature

 Date

Livestock Chairman-Tommy Staier (904) 864-3676

Date received by Fair Secretary _____

MARKET SWINE ENTRY FORM -- 2016 BAKER COUNTY FAIR



Exhibitor Information

Name: _____ Age on 10/1/16: _____ Grade _____
 Address: _____
 City/ST: _____ Zip: _____
 Phone: _____
 Email: _____
 Circle One: Sr FFA Middle FFA 4H

Completed forms must be turned in at initial weigh-in date of June 25, 2016

(Gray boxes to be completed by Fair)

Breed of Swine	Animal's Name (optional)	Birth Date	Breeder (farm where born)	Ear Tag #	End Weight

By signing below, I/We hereby certify that the above information is true and accurate. I/We further certify that any drug antibiotic, wormer or biological substance which may have already been, or that will be, administered by myself, or any other person, was/will be done in strict compliance with the manufacturer's label requirements, and any applicable withdrawal times will be strictly adhered to before swine are returned to the fair. I/We also agree that I/we have read, and agree to, the rules and regulations published in the fairbook.

 Exhibitor's Signature

 Date

 Parent/Guardian Signature
(if Exhibitor is under age 18)

 Date

 Chapter Advisor or Club Leader Signature

 Date

Swine Chairman-Doug Register (904) 613-9568

Livestock Chairman-Tommy Staier (904) 864-3676 Date received by Fair Secretary

MARKET PULLET ENTRY FORM -- 2016 BAKER COUNTY FAIR



Exhibitor Information

Name: _____ Age at 10/1/16: _____ Grade _____
 Address: _____
 City/ST: _____ Zip: _____
 Phone: _____ Email: _____
 Circle One: Sr FFA Middle FFA 4H

Completed forms must be turned in at initial tagging date of June 25, 2016

I would like to enter the Poultry Showmanship Contest: ____ Yes ____ No

	Breed	Identification	Award (to be completed by fair)
1	Pullet		
2	Pullet		
3	Pullet		
4	Pullet		
5	Pullet		
6	Pullet		
7	Pullet		
8	Pullet		
9	Pullet		
10	Pullet		

By signing below, I/We hereby certify that the above information is true and accurate. I/We further certify that any drug antibiotic, wormer or biological substance which may have already been, or that will be, administered by myself, or any other person, was/will be done in strict compliance with the manufacturer's label requirements, and any applicable withdrawal times will be strictly adhered to before pullets are returned to the fair. I/We also agree that I/we have read, and agree to, the rules and regulations published in the fairbook.

Exhibitor's Signature

Date

Parent/Guardian Signature

Date

Chapter Advisor or Club Leader Signature

Date

Date received by Fair Secretary