

YEAR _____

LIVESTOCK CLASS ENTRY VERIFICATION FORM

This form must be **filled out and signed** for each member exhibiting at the Poweshiek County
4-H/FFA Fair

ENTRIES WILL NOT BE ACCEPTED WITHOUT THIS FORM!!!

Exhibitor's Name: _____

Phone #: _____ Email: _____

Club/Chapter: _____

Please check each department entered:

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> BEEF | <input type="checkbox"/> BEEF CARCASS |
| <input type="checkbox"/> BREEDING BEEF | <input type="checkbox"/> BOTTLE CALF |
| <input type="checkbox"/> DAIRY CATTLE | <input type="checkbox"/> OTHER GOAT |
| <input type="checkbox"/> DOG | <input type="checkbox"/> DAIRY GOAT |
| <input type="checkbox"/> HORSE | <input type="checkbox"/> MEAT GOAT |
| <input type="checkbox"/> POULTRY | <input type="checkbox"/> RABBIT |
| <input type="checkbox"/> SHEEP | <input type="checkbox"/> SWINE |
| <input type="checkbox"/> CAVY | <input type="checkbox"/> LLAMA |

I have indicated each individual division the above listed member has entered for the Poweshiek County
Fair. I understand **NO** entries can be added after 5 p.m. July 1st.

Parent/Leader Signature: _____

Fair Office Use Only

I certify that an entry was received for each division indicated above.

TOTAL BEEF/BOTTLE CALF BEDDING FEES DUE: _____

Received in fair office by: _____ Date _____