Warren County Fair - Entry Form

4H/FFA/ Open Class

Press firmly, you are making 3 copies

Name_____ Exhibitor No._____

Address_____
(Box, Street) (Town) (Zip Code)

Daytime Phone #_____ Cell Phone(s)_____

4H Club/FFA Chapter Name_____ Grade Completed_____

Division No.	Class No.	4H/FFA/Open Class Description of Entry	Animal Breed	Animal's Birthdate	Premium *(Office use only)*

Total # of HEAD: Sheep___Hogs____Horses___Market Beef____Breeding Beef_____4H Dogs___

I understand and agree that, as owner and/or exhibitor, I have the care, custody and control of my animals and that I am primarily liable for injuries occurring to the person or property as a result of any act of my animals and that I have made my own provisions for liability insurance to protect myself from that liability.

Amount paid:_____ **Signed:**_____

Paid by:
_____Cash
_____Check

Exhibitor or Exhibitor's Designated Representative

SAMPLE