

OTSEGO COUNTY FAIR ASSOCIATION INC.

P.O. Box 469
 Morris, New York 13808
 Phone (607) 263-5289
 Fax (607) 263-5215

Livestock Entry Form

Use This Form For the Following Departments:

Dept. BB: Dairy, Dept. C: Sheep, Dept. D: Rabbits, Dept. E: Goats, Dept. F Swine, Dept. P: Poultry

Mail to: Entry Clerk, Otsego County Fair (Address Above)

Please use a separate entry form for each department.

Refer to Premium Book for Entry Time (Winner's premium checks will be sent to the address on this form within 60 days of the close of the fair).

Please enter me for the articles named herein, subject to the rules and regulations in your Premium List to which I agree:

Department Letter: _____

Please Print Legibly!

Exhibitor's/Farm Name: _____

Name on Premium Check: _____

Mailing Address: _____

(if different from Exhibitor/Farm Name)

Phone Number: _____

Email: _____

Section	Class	1: Animal Name 2: Sire (If Applicable)	Tattoo #	Registration #	Birthdate	Entry Fee	Bred By Exhibitor

Pens/Stalls Needed _____ x \$3.00 = _____

Exhibitor Entry Statement: I have read and understand, consent to, and agree to abide by the IAFE (International Association of Fairs and Expositional Code of Show Ring Ethics as stated in the premium list of this event. A separate copy may be obtained on request form show organizer.

Exhibitor: _____ Parent/Guardian: _____
 (Owner Exhibitor, Fitter, Trainer, or absolutely responsible person)

Date: _____

What day do you plan on brining your animals to the fair?

Est Arrival Time Sunday _____ AM/PM or Monday _____ AM/PM

Entry Fees	
Stall/Pens	
Exhibitor Pass	
Helper Pass	
Barn Pass	
Camper/Tent	
Total	

Check entry clerk's calendar for entry closing dates.

Make all checks payable to: Otsego County Fair.

All Premium checks must be cashed within 60 days of date on check.