

BEEF LIVESTOCK ENTRY FORM

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

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:

Please Print Legibly!

Exhibitor's/Farm Name: _____

Name on Premium Check: _____

Mailing Address: _____

Phone Number: _____ Email: _____

___ Check this box
 you are only coming
 in the morning of the
 Open Beef Show.

Section	Class	Animal Name	DOB	Breed	USDA 840- Number / registration number if registered beef	Sire Name

Pen/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 from show organizer.

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

Date: _____

What day do you plan on bringing your animals to the fair?
 Est Arrival Time Sunday _____ AM/PM or Monday _____ AM/PM

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.

Entry Fees \$2.00	
Stall/Pens \$3.00	
Exhibitor Pass \$10.00	
Helper Pass \$10.00	
Infield Parking Pass	
Camper/Tent	
Total	