

Fair Office - Official Use Only

Date Received: _____

Amount Paid: \$ _____

Waiver of Liability _____

Cash / Check or Money Order #: _____

LAWRENCE COUNTY FAIR, 464 MIDWAY ROAD, NEW CASTLE, PA 16101

BREEDING SHEEP ENTRY FORM

Please read & follow instructions. Any mistakes could lead to disqualification of the exhibitor or animal being registered.

Use this entry form for OPEN and 4-H classes.
 Use a SEPARATE entry form for EACH EXHIBITOR & EACH BREED.
 Use one line per class. No more than 2 animals per exhibitor per class.
 Entry Fee - \$5.00 per animal per department.

Entries must include 1) Entry Form 2) Fees, 3) a WAIVER of LIABILITY form.
 (All available on the website.)

ENTRIES ARE DUE JULY 15. Drop off at the office or mail to Lawrence County Fair,
 464 Midway Road, New Castle, PA 16101.

Personal Information

Exhibitor Name: _____

Exhibitor #: _____

Address: _____

Phone #: _____

City: _____

State: _____

Zip Code: _____

OPEN				4-H/FFA				# of	CLASS NAME
DEPT	SECT	CLASS	FEES	DEPT	SECT	CLASS	FEES	SHEEP	
Example: 4	1	2	\$5.00	104	1	1	\$5.00	1	Fall Ram Lamb
1.									
2.									
3.									
4.									
5.									
6.									

Total Fees (Open) _____ Total Fees (4-H) _____ Total # of Animals _____

I attest and affirm that a "veterinary consultation relationship" – as that phrase is defined in the Animal Exhibition Sanitation Law found at 3 Pa.C.S.A. § 2501 et seq. and any amendments thereto – exists with regard to any animals I will be exhibiting.

Signature of Exhibitor _____ Date _____

Signature of Parent/Guardian _____ (If Exhibitor is under 18 years of age)

Please print name of Veterinarian _____

PHOTO RELEASE (Please check)

_____ I will allow photographs to be taken of my son/daughter and/or me that have the potential to be used in Lawrence County Fair exhibits or publications, published in local newspapers, or posted on Lawrence County Fair web sites(including FaceBook) or other digital media.