				Fair	r Office - Off	ficial Use Only					
Date Received: Waiver of Liabilit			Liability	Amount Pai	d: \$	Cash / Check:		Grounds Fee			
		L	AWRENCE COU	INTY FAIR, 4	64 MIDW	AY ROAD, NEV	V CASTLE, PA	16101			
			DA	IRY, BEEF	<sup>-</sup> , & GO	AT ENTRY	FORM				
		Please	read & follow instru	ictions. Any mi	stakes cou	Id lead to disqualif	ication of the exh	ibitor or anima	ıl.		
			ded for <b>OPEN</b> and/or <b>4-I</b> per animal.	H/FFA DAIRY, BEI	EF and GOA	T entries ONLY. Do N	OT use this form for	MARKET ANIMA	LS!		
Please p	print or t	ype leg	bly. Information will be			EE \$5 per Exhibitor	EXTRA STALLIN	IG - \$3.00 PER F	ООТ		
			classes: \$5.00 per he FA classes: \$5.00 per	ad of DAIRY CAT	TLE \$5.0		NG BEEF <u>\$5.00</u>	per head of BRE	EDING GOA	ATS	
NOTE:	If enter	ring bo	th OPEN & 4-H/FFA c	lasses, entry fee	es must be l	paid for BOTH! X form (All availabl	on the website )				
ENTRIE	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.										
Se	para	te en	try forms are red						Breed.		
	-			-	, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	****	-	, *****			
Species:			DAIRY	BEEF			d				
Exhibitor N	Exhibitor Name:				Exhibito	or's #:	Pho	ne #:			
Address: _					City:			State:	_Zip:		
OPEN	4-H	/FFA	Goats: Please include	Scrapie Number						FEE	
Dept. Clas	_	Class	REGISTRY NA	ME	D.O.B.	Sire	Dam	Bre	EEDER	\$5 per Dept	B/O
											$\vdash$
	1									1	1

GROUP CLASSES- \$5 per o	class Please pla	ace an X or $\checkmark$ in the classes you plan to enter.				
DAIRY Only one entry per Exhibitor in		BEEF	GOAT			
11Best 3 Junior Females	30 Produce of Dam	20 2 Females (Bred & Owned by Exh.)	16 Dam & Daughter			
28 Best 3 Females	31 Dam & Daughter	30 2 Bulls (Bred & Owned by Exh.)				
29 Dairy Herd	32 Breeder's Herd of 5 Females	31 Get-of-Sire	JUNIOR GOATS			
JUNIOR DA		32 Jr. Get-of-Sire	16 Dam & Daughter			
25 Dam & I	Daughter					

Veterinary Consultation Relationship section MUST be completed & filed for an entry to be valid.

*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	D.	Date				
Signature of Parent/Guardian	(1	(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 n exhibits or publications, published in lo other digital media.	ny son/daughter and/or me that have the cal newspapers, or posted on the Lawrei	potential to be used in Lawrence County Fair nce County Fair web sites (including FaceBook) or				
NOTES: (stalling requests, etc)	wy son/daughter and/or me that have the potential to be used in Lawrence County Fair cal newspapers, or posted on the Lawrence County Fair web sites (including FaceBook) or   PREMIUM CHECK NOTICE   dividual's name rather than he you would like used:					
	PREMIUM CHECK NOTICE	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
If your premium check is to be issued in an in a farm name, please indicate here the nar		•				

OPEN		4-H/FFA		Goats: Please include Scrapie Number				1	FEE	
			Class	REGISTRY NAME	D.O.B.	Sire	Дам	Breeder	\$5 per Dept	B/o
										$\vdash$
										j I