

Fair Office - Official Use Only

Date Received: _____ Amount paid: \$ _____ Waiver of Liability _____	(Please circle all that apply) Check Cash Money Order Check / Money Order #
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**LAWRENCE COUNTY FAIR, 464 MIDWAY ROAD, NEW CASTLE, PA 16101
 MARKET ANIMAL ENTRY FORM**

Please read & follow instructions. Any mistakes could lead to disqualification of the exhibitor or animal.
 Use a **SEPARATE** entry form for **EACH EXHIBITOR & EACH SPECIES.**
 Use one line for each animal.
Entry Fee - \$5.00 per animal.
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.

DO NOT ENTER CARCASS ANIMALS ON THIS SHEET

Personal Information

Exhibitor Name: _____ Exhibitor #: _____
 Address: _____ Phone #: _____
 City: _____ State: _____ Zip Code: _____

Animal Registration Info

	Dept.	Section	SPECIES	Tag #	Entry Fee
Example:	103	30	Market Steer	NCC-1711	\$ 5.00
1.					
2.					
3.					

Will you be entering showmanship? Yes No

Your age as of January 1st? _____

I attest and affirm that a "veterinary-client-patient 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.**