



Office Use Only	
Date Rec'd	_____
Amount Paid \$	_____
	_____ # Check or Cash
Date Entered	_____
Exhibitor #	_____

Market Animal Entry- Poultry

Complete this form before attending animal tagging and weigh in

Exhibitors Name: _____ Birth date: _____ Current Age: _____

Address: _____

Email: _____ Phone # _____

Parent/Guardian: _____ FFA Chapter or 4-H Club _____

The exhibitor has established a Veterinarian-Client Patient Relationship for the animal(s) entered and exhibited as defined in the Animal Exhibition Sanitation Law, 3 Pa. C.S.A. § 2501 et seq. and any amendments thereto; exhibitor authorizes Farm Show management, or its designee, to use, reproduce and/or publish photographs and/or video including exhibitor's image, likeness and/or voice without compensation in order to promote or publicize its activities.

Please refer to the fairs website as well as the PENNSYLVANIA DEPARTMENT OF AGRICULTURE ANIMAL HEALTH REQUIREMENTS AND RECOMMENDATIONS FOR ANIMALS FOR EXHIBITION, INCLUDING COMMERCIAL EXHIBITION for clarification on show requirements.

Exhibitors Signature: _____ Parents Signature: _____

Fees per head to be shown~ Meat Pen- **\$2.00** per pen Roaster **\$2.00**

Make checks payable to: **Beaver Community Fair.**

Youth	Class	Lot #	Description (as printed in book)	Animal ID#	Weight
10	80	1002	Meat Pen (3 Birds)		
10	80	1001	Roaster		
10	67		Showmanship Lot Options: <i>6000 (Sr), 6001(Inter), 6002 (Jr), 6003(Novice)</i>		

Form due day of choosing.