FORT BEND COUNTY FAIR ASSOCIATION

2021 Commercial Crossbred Pen of Two Heifer Entry Form

• One form per exhibitor per species • Each exhibitor must have a current-year Exhibitor/Participant Release of Liability and a W-9 in the exhibitor's name on file at the Fair Office. Only one (1) is needed per exhibitor, not per entry. *****In addition to this form, ROL & W-0 (due in Fair Office), exhibitors must submit an online entry and $20.00 entry fee at https://fbcfa.fairwire.com no later than April 29, 2021. *****

The undersigned hereby consents and agrees that the animal described on the entry form may, at the discretion of the Fair Management, be tested for unauthorized use of medication or drugs. Exhibitor and Parent/Guardian states that they have read, understand and agree to abide by all the General Rules and Regulations of the Fort Bend County Fair, the 2021 Fort Bend County Fair Division Rules for each species entered and the 202 Fort Bend County Fair General Livestock Rules and Regulations. I understand that auction checks will not be released until Buyer thank you notes and required paperwork, including a signed disposition sheet, are turned into Fair Office.

Exhibitor's Name:_____

Mailing Address:_____ City:_____ Zip:_____

Physical Address:_____ City:_____ Zip:_____

DOB:_____ Age: ***(year showing)***_____ **Quality Counts Verification #**_____

Phone:_____ Email:_____

Parent/Legal Guardian's Name:_____

Guardian Cell: _____Guardian's Email:_____

Complete School Name: ***(year showing)***_____ Grade: ***(year showing)***_____

Club/Chapter Name:_____

Leader/Advisor Name:_____ Email:_____

Leader/Advisor Phone:_____ **Leader/Advisor Signature**:_____

Exhibitor Signature:_____ Date:_____

Guardian Signature:_____ Date:_____

Family Tag: **YES** or **NO** Family Names:_____

Physical Address in which animal will be housed:_____

Tag	Tag	Tag	Tag	Tag	Tag	Tag

Breeder's Statement

Breeder's Name:_____

Breeder's Address:_____

Breeder's Phone Number:_____ **Breeder's Email:**_____

I certify that the heifers exhibited by_____
(*Exhibitor*)

were born on_____**, and purchased on** _____**,**
(*Birth Date(s)*) **(*Date Purchased*)**

and its bloodline is _____**. I certify that this heifer has been calf hood vaccinated for brucellosis.**

Breeder's Signature:_____ **Date:**_____

ROL:____ W9:____ Cash:____ Card:____ Check #:____ $20.00 Entry Fee