

OFFICIAL JR. COMMERCIAL EWE ENTRY BLANK

October 4 - October 13, 2019

DEADLINE FOR ENTRIES - SEPTEMBER 1, 2019

**DO NOT
FAX ENTRIES!**

FOR FAIR USE ONLY

Exhibitor No. _____
 Postmark Date _____
 Date _____
 Amount Paid \$ _____
 Deposit No. _____

NOTE: ANY EXHIBITOR WITH PREMIUMS TOTALING \$600 OR MORE WILL BE REQUIRED TO FURNISH COMPLETE W-9 BEFORE PAYMENT WILL BE ISSUED. SEE ENTRY FORM SECTION FOR W-9 FORM. EXHIBITOR WILL BE NOTIFIED WHEN TOTAL PREMIUMS HAVE BEEN DETERMINED.

I have read and understand, and in consideration for being permitted to exhibit at the Dixie Classic Fair, agree and consent to abide by the rules and regulations, including the IAFE (International Association of Fairs and Expositions) National Code of Show Ring Ethics as posted in the Show Ring Office. I further declare that all statements made are true. "I HEREBY ENTER ANIMALS AT MY OWN RISK SUBJECT TO THE RULES & REGULATIONS OF THE FAIR. I HEREBY AGREE TO RELEASE, INDEMNIFY AND HOLD HARMLESS THE FAIR AND THE CITY OF WINSTON-SALEM, ITS AGENTS, EMPLOYEES, OFFICERS AND CONTRACTORS FROM ALL CLAIMS, LOSSES, INJURIES, OR DAMAGES OF ANY NATURE ARISING FROM, BY OR TO SAID ANIMALS" (OWNER & EXHIBITOR MUST SIGN BELOW OR ENTRY WILL BE RETURNED).

NOTE: JR. EXHIBITORS: I CERTIFY THAT I HAVE FITTED AND CARED FOR ANIMALS EXHIBITED FOR 60 DAYS. (MUST BE SIGNED):

ENTRY & PEN FEES

Separate entry blank for each exhibitor and each show.

Breed: _____

_____ Pens (if postmarked on or before 09/01) No Fee

_____ Pens (if postmarked 09/02 to 09/11) \$5 ea.

_____ Participating In Shepherds Lead

Total Enclosed \$ _____

If entry is late, entry fees must accompany entry blank.

**Mail entries with check or money order to:
CITY OF WINSTON-SALEM / DIXIE CLASSIC FAIR**

P.O. BOX 68
 WINSTON-SALEM, NC 27102
 TELEPHONE: (336)727-2236
DO NOT FAX!

Age of Exhibitor
As Of 01/01/19

Exhibitor: _____ Signature: _____

Guardian/Parent: _____
 (for Jr. Exhibitor) (print) (signature)

Social Security Number (REQUIRED): XXX-XX-_____
 (Last 4 digits of social security number for each exhibitor must be provided. If not provided, entry will not be accepted. *See Note.)

Address: _____
 Street City State Zip

E-Mail: _____

Owner Signature: _____

Farm Name: _____ Phone: _____

ENTRY BLANK MAY BE COPIED IF NEEDED.

PLEASE FILL OUT COMPLETELY! (Type or print clearly)

JUNIOR COMMERCIAL EWE SHOWS

Scrapie Tag #

Class # _____ Date of Birth _____

Class # _____ Date of Birth _____

Class # _____ Date of Birth _____

Class # _____ Date of Birth _____

SEE PREMIUM LIST FOR ALL RULES AND REGULATIONS GOVERNING LIVESTOCK, INCLUDING HEALTH REGULATIONS, ARRIVAL TIMES, RELEASE TIMES, ETC.

**** PLEASE NOTE ****

Errors or omissions in premium payments must be reported to the Fair Office by December 31 or payment will not be made.

Juniors are limited to four (4) and **only one (1) per class** for Commercial Ewes.

Separate entry blank must be used by each exhibitor for each breed. No entries will be accepted unless complete information is furnished and fees enclosed.

**** HEALTH CERTIFICATES FOR OUT OF STATE ANIMALS ONLY MUST BE CHECKED BEFORE UNLOADING ANIMALS AT FAIRGROUNDS ****

JR. COMMERCIAL EWE