2019 PUTNAM COUNTY FAIR
BREEDING SHEEP ENTRY FORM

THIS COMPLETED SHEET MUST BE TURNED IN BY 5:00 P.M. MONDAY, MAR. 4, 2019, TO:
PUTNAM COUNTY FAIR OFFICE
PO Box 400, East Palatka, FL 32131
*** Entry Fees are due with form. ***
*** Early Bird Registration Fee $5 per animal by Mon., 3/4/19 @ 5pm ***
*** Late Registration Fee $10 per animal 3/5/19 – Day of Show (Sat, 3/23/19) ***

SHOWN BY: _____

MAILING ADDRESS: _____

CITY: _____ ZIP: _____ PHONE: _____

EMAIL ADDRESS: _____

BIRTHDATE: ____month ____day _____year Age as of 9/1/18: _____

1. EWE NAME: _____ TAG/SCRAPIE#: _____

CIRCLE ONE: BLACK FACE WHITE FACE AOB/HAIRED

BREED: _____ DATE OF BIRTH: _____

2. EWE NAME: _____ TAG/SCRAPIE#: _____

CIRCLE ONE: BLACK FACE WHITE FACE AOB/HAIRED

BREED: _____ DATE OF BIRTH: _____

3. EWE NAME: _____ TAG/SCRAPIE#: _____

CIRCLE ONE: BLACK FACE WHITE FACE AOB/HAIRED

BREED: _____ DATE OF BIRTH: _____

4. EWE NAME: _____ TAG/SCRAPIE#: _____

CIRCLE ONE: BLACK FACE WHITE FACE AOB/HAIRED

BREED: _____ DATE OF BIRTH: _____

5. EWE NAME: _____ TAG/SCRAPIE#: _____

CIRCLE ONE: BLACK FACE WHITE FACE AOB/HAIRED

BREED: _____ DATE OF BIRTH: _____

REGISTRATION FEE(S): **$**_____

$5.00 SHOWMANSHIP ENTRY FEE: (optional) **$**_____

TOTAL ENTRY FEES DUE **$**_____

By signing this entry form I'm acknowledging that it is my responsibility to read and abide by all rules and regulations of the Putnam County Fair Sheep show.

EXHIBITORS SIGNATURE: _____ DATE: _____

PARENT SIGNATURE: _____ DATE: _____

A COMPLETED HOLD HARMLESS MUST BE ATTACHED