



SUWANNEE COUNTY FAIR
2019

HEIFER/COW-CALF ENTRY FORM

CHAPTER ANIMALS MUST BE ASSIGNED TO AN EXHIBITOR

EXHIBITOR'S
NAME _____

ADDRESS _____ DOB _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ COUNTY _____

EMAIL ADDRESS _____ ENTER IN SHOWMANSHIP CLASS _____
Y/N

*****ANIMAL INFORMATION*****

HOME GROWN _____ HEIFER _____ COW/CALF _____ TAG/BRAND# _____

BREED _____ DOB (COW) _____ DOB (CALF) _____

DATE LEASED OR PURCHASED _____ ANIMAL'S NAME _____

HOME GROWN _____ HEIFER _____ COW/CALF _____ TAG/BRAND# _____

BREED _____ DOB (COW) _____ DOB (CALF) _____

DATE LEASED OR PURCHASED _____ ANIMAL'S NAME _____

HOME GROWN _____ HEIFER _____ COW/CALF _____ TAG/BRAND# _____

BREED _____ DOB (COW) _____ DOB (CALF) _____

DATE LEASED OR PURCHASED _____ ANIMAL'S NAME _____

I certify that the above animal on this entry form has been owned or leased by the exhibitor, as required
by the rules of the Heifer Show at least (60) days before the show date.

I also affirm that Suwannee County Heifer Show record book will be maintained on this heifer.

Record Books and show info can be obtained from suwanneecountyfair.org

I have read and understood the rules of the Heifer show as well as the rules of the Suwannee County Fair
And agree to abide by them.

SIGNED _____
EXHIBITOR

PARENT OR GUARDIAN

FFA ADVISOR, 4H AGENT, COUNTY AGENT

FORMS MUST BE RECEIVED BY FEBRUARY 22, 2019

MAIL TO: Suwannee County Fair
Heifer Show
P.O. Box 266
Live Oak, FL 32064
PH (386) 362-FAIR
FAX (386) 362-1980