

WALLER COUNTY FAIR – MARKET ENTRY FORM

Payment Total: _____

Cash:

Check #: _____

CC Auth #: _____

PROJECT: _____ IS THIS A FAMILY TAG IN? YES NO
(IF YES, PLEASE LIST ALL EXHIBITORS BELOW)

For Board Use

EXHIBITOR #1

NAME: _____

GRADE: _____

SHIRT SIZE: YS YM YL AS AM AL AXL

DATE OF BIRTH: _____

AGE AS OF 09/01/__: _____

CURRENT SCHOOL: _____

FFA CHAPTER/4H CLUB: _____

EXHIBITOR FEE \$30:

EXHIBITOR #2

NAME: _____

GRADE: _____

SHIRT SIZE: YS YM YL AS AM AL AXL

DATE OF BIRTH: _____

AGE AS OF 09/01/__: _____

CURRENT SCHOOL: _____

FFA CHAPTER/4H CLUB: _____

EXHIBITOR FEE \$30:

EXHIBITOR #3

NAME: _____

GRADE: _____

SHIRT SIZE: YS YM YL AS AM AL AXL

DATE OF BIRTH: _____

AGE AS OF 09/01/ : _____

CURRENT SCHOOL: _____

FFA CHAPTER/4H CLUB: _____

EXHIBITOR FEE \$30:

EXHIBITOR #4

NAME: _____

GRADE: _____

SHIRT SIZE: YS YM YL AS AM AL AXL

DATE OF BIRTH: _____

AGE AS OF 09/01/ : _____

CURRENT SCHOOL: _____

FFA CHAPTER/4H CLUB: _____

EXHIBITOR FEE \$30:

Please mark all other projects _____ Calf Scramble _____ Horse _____ Broilers _____ Turkey _____ Swine _____ Goat _____ Lamb _____ Heifer
you are planning to show this year: _____ Steer _____ Rabbit _____ Creative Living _____ Breeding Doe _____ Pen of 2

MAILING ADDRESS: _____ CITY: _____ ZIP: _____

ADDRESS OF LOCATION WHERE PROJECT WILL BE RAISED: _____

EMAIL ADDRESS: _____

MOTHER'S NAME (or guardian): _____ CELL PHONE #: _____

FATHER'S NAME (or guardian): _____ CELL PHONE #: _____

TAG #: _____ WT _____ Breed _____ TAG #: _____ WT _____ Breed _____

TAG #: _____ WT _____ Breed _____ TAG #: _____ WT _____ Breed _____

\$30 Per Exhibitor: #of exhibitors _____ x \$30 = _____

\$10 Fee Per Animal: # of animals _____ x \$10 = _____

\$5 Per Animal-Waste Disposal: # of animals _____ x \$5= _____

TOTAL DUE: _____

EXHIBITOR SIGNATURE(S): _____

DATE: _____

PARENT SIGNATURE: _____

DATE: _____

The Undersigned Exhibitor and/or Parent on oath states: I hereby release Waller County Fair Association, its officers, directors, employees, workers, and advisers from any loss, injury, or damage of whatsoever kind resulting from activities associated with any Fair program. I further state that all information in the heading of this form is correct, that I have received a copy of the Waller County Fair General Rules and Regulations and a copy of the Division Rules for the division entered and will adhere to all rules. I further understand that all projects are subject to random drug testing.