

JUNIOR DAIRY

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Please Print

SOCIAL SECURITY NUMBER (REQUIRED) _____

EXHIBITOR'S NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE (_____) _____

BIRTHDATE (Month-Date-Year) _____ Age as of Sept. 1, 2020 _____

USE ONE LINE PER ENTRY

	Dept.	Section Number	Class Number	Class Name	Is this animal Entered in 4-H?	Animal Birth Date	Premise ID Breed & Tattoo	Entry Fee \$5 each
1	H03							
2	H03							
3	H03							
4	H03							
5	H03							
6	H03							
7	H03							
8	H03							
9	H03							
10	H03							
11	H03							
12	H03							
13	H03							
14	H03							
Number of Stalls or Pens needed at \$5.00 each							x \$5.00 =	
Number of Head (NOT ENTRIES) Of Dairy Animals showing								
Number of these animals being shown in the Ogle County 4-H show								

Total amount this page _____

Transfer the total amount to cover sheet Dairy Line 2 H03

Do not write on back of form, if you need more space use another copy of this sheet and attach. Submission of this entry form indicates acceptance of Rules that apply to each class entered as stated in premium book.

Please write plainly and give all information.

Entries with Class Number(s) only will not be accepted.

ALL FEES MUST ACCOMPANY ENTRY BLANK (NO Refunds).