PLEASE KEEP A COPY FOR YOUR RECORDS

Entry Form

Exhibitor Name_____Jr Exhbr Date of Birth_____
Mailing Address_____City_____
Phone_____Zip Code_____

Club/Chapter Name_____Date_____

EXHIBITORS PAYING $30 OR MORE
FOR STILL EXHIBITS & $50 OR MOR
FOR LIVE EXHIBITS WILL RE
A FREE ADMISSI

Modoc District Fair
34th DAA
PO Box 26
Cedarville, CA 96104
Phone (530) 279-2315
Fax (530) 279-2555

PREMIUM BOOK-STILL EXHIBITS | **PREMIUM BOOK- LARGE AND SMALL LIVESTOCK & HORSE SHOW**

	LEAVE BLANK	DIV. #	CLASS #	ENTRY FEE	DESCRIPTION OF ENTRY (or Name of Horse & Rider)	SEX	BIRTH DATE	ID #	BREEDER NAME	REG. #	SIRE REG. #	DAM REG. #

gnature for Junior Exhibitors
l 4H & FFA Projects)
'signed states that they are the
recognized supervisor of the project
above; that the statements regarding the
same are true.

Leaders Name_____
(Please Print
Signature_____

I agree to abide by all rules and regulations contained
in the Official Premium List and State Rules (available
through the fair office) governing this competi
hereby release the 34th Distric
the State of Califc
cha

Parent'

 # Stalls _____ **$20 each**

 # Camp Spaces _____ **$20 each**

Exhibitor Code _____

Entry Fee(s) _____

Cattle Fee _____

Stall Fee(s) _____
44400

Camp Fee _____
47700

Total Fees _____

Receipt # _____