COLUMBIA COUNTY FAIR

Livestock/Animal Entry Form

Dept. 02A Dairy Cattle Dept. 02B Beef Cattle Dept. 03A Sheep Dept. 04A Poultry

CONSULT EACH DEPARTMENT FOR RULES OF ENTRY

DEPARTMENT ☐ **JUDGING #** ☐

Exhibitor's Name _____ Birthdate (if under 18) _____

Mailing Address _____ City _____ State ____ Zip _____

Phone No. _____ Farm Name _____

DEPT.	SECTION	CLASS	ANIMAL NAME	REGISTRATION #	BIRTHDATE	ENTRY FEE	PLACING	AWARD
					TOTAL			

Make checks payable to Columbia County Fair. All premium checks must be cashed within **30 days** of issue.

Signature _____ Date _____ Entry Fees ☐