

Is animal registered in exhibitor's name _____ or as a partnership?
 If partnership, list name of partnership _____
 In what classes are partnership animals entered? _____
 This is to certify (exhibitor) _____ is a member of the above stated partnership.
 Signed (parent/guardian) _____

**THE OHIO STATE FAIR
 JUNIOR BEEF CATTLE DIVISION
 ENTRY DEADLINE JUNE 20
 Please print clearly**

Total No. Breeding Beef Cattle _____ x \$ 8 each.....
 Total No. Market Beef _____ x \$ 8 each.....
 Total No. BP & CQ _____ x \$ 8 each.....
 Bedding Fee, per animal _____ x \$15 each.....
 Advance Single Day Admission Pass _____ x \$ 6 each.....
 6-Day Admission Pass _____ x \$28 each.....
 12-Day Admission Pass - one person usage _____ x \$50 each.....

Exhibitor's Age (as of Jan. 1) _____ Birth Date Mo. _____ Day _____ Yr. _____
 Name of Exhibitor _____ Social Security No. _____
 Complete Address _____ Telephone w/area code () _____
 City _____ Zip Code _____ County _____
 Email Address _____
 Name of FFA Chapter/4-H Club (Please circle one) _____
 Name of FFA Instructor/4-H Advisor _____
 Instructor/Advisor Telephone w/area code () _____

Junior Fair exhibitors will continue to receive passes for each day they are required to attend the Fair. Junior Fair Exhibitors tickets are a different color than all other passes.

Check No. _____ Total Amount Received _____

DIVISION NO.	CLASS NO.	NAME OF ANIMAL	SIRE NAME	TATTOO NO.	DATE OF BIRTH	REGISTRY NO.	SEX

1. By signing this entry, I hereby certify that the entries made in the Junior Livestock Competition meets the rules and regulations under which they will exhibit, that all of the information on the entry is truthful, complete and accurate that my child has had sole custody and control of the animal since the date of the animal's birth or since the date the animal was purchased or acquired by my child, and that the animal has not been tampered with or fitted in any unethical manner. 2. The exhibitor hereby agrees to be bound by the Rules and Regulations of the Junior Livestock Department, and further agrees to be bound by the decision of the Ohio Expositions Commission in case of any dispute arising from the interpretation or application thereof. Premiums will not be paid if Social Security Number is not given or if the entry blank is not signed. I certify that the number shown on this form is my correct taxpayer identification number. 3. The 4-H and FFA Advisor are verifying that the 4-H and FFA member is a member in good standing of the county and is enrolled in the project in which they have entered. 4. The County Extension is verifying that the 4-H member is a member in good standing of the county and is enrolled in the project in which they have entered. Any photographs taken of me or of anyone over whom I am legal guardian become the sole property of the Ohio Expositions Commission. Such photographs may be used at the Commission's discretion without compensation to or prior approval from me.

1. _____ Date _____ 2. Exhibitor _____ Date _____
 3. Instructor/Advisor _____ Date _____ 4. Co. Agent _____ Date _____

The Ohio Expositions Commission is an Equal Opportunity Employer and Service Provider

**MAIL TO: ENTRY DEPARTMENT, OHIO STATE FAIR
 717 EAST 17TH AVENUE
 COLUMBUS, OHIO 43211**

**ALL ENTRIES MUST HAVE POSTAGE STAMPS.
 METERED ENTRIES WILL NOT BE ACCEPTED**

IMPORTANT: Please read carefully Junior Livestock General Rules and Regulations

Entry blank may be Photocopied