

USE SEPARATE ENTRY BLANK FOR EACH OWNER
 USE SEPARATE ENTRY BLANK FOR EACH SPECIE & BREED

Du Quoin State Fair

JUNIOR LIVESTOCK ENTRY BLANK

Closing Date for Entries August 14, 2020
 Late Entries with Late Entry Fee accepted
 thru August 21, 2020

Check Specie:

___ Beef Cattle ___ Swine ___ Meat Goats
 ___ Dairy Cattle ___ Sheep ___ Dairy Goats

Receipt # _____ Total _____
Exhibitor's # _____ ID # _____

Make Check Payable To: Du Quoin State Fair
 Mail Entries To: Du Quoin State Fair
 655 Executive Drive
 Du Quoin, IL 62832
NO REFUNDS

BREED	JR CLASS #	CLASS NAME	REGISTRATION/TATTOO # OR EAR NOTCH	BIRTHDATE	ANIMAL'S NAME

TOTAL ANIMALS ENTERED
 IN ALL BREEDS: _____

REQUEST TO BE PENNED/
 STALLED BY:

Name of Exhibitor _____

Birth Date: Month _____ Day _____ Year _____

Address, Street or RFD: _____

City or Town _____ Zip _____

Telephone Number _____ Email _____

Social Security # (First Time State Fair Exhibitors ONLY) _____

County _____

CONDITION OF ENTRY

By signing this form, I certify I have received and read the contents of the Premium Book and that I will abide by all applicable rules contained therein, including rules relating to administration of drugs to animals, and all other rules relating to the Du Quoin State Fair and the laws and regulations of the State of Illinois.

Signature of Parent/Guardian

T-Shirt Size: (Circle Correct Size)

Child: S M L or _____

Adult: S M L XL XXL

FOR OFFICE USE ONLY

___ Beef Cattle @ \$10.00 per head _____

___ Dairy Cattle @ \$10.00 per head _____

___ Swine @ \$5.00 per head _____

___ Sheep @ \$5.00 per head _____

___ Meat Goats @ \$5.00 per head _____

___ Dairy Goats @ \$5.00 per head _____

___ Exhibitor Pass @ \$30.00 _____

___ Beef Bedding Fee @ \$20.00 _____

TOTAL _____

Livestock Trucks, Trailers & Goose Necks must be parked in Designated Area.

IMPORTANT NOTICE: This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under 20 ILCS 210/1-13. Failure to provide this information shall prevent this form from being processed. This form has been approved by the State Forms Management Center in accordance with the Americans With Disabilities Act any attendee requiring a reasonable accommodation should notify us of their needs by August 1.