

## SENIOR LIVESTOCK ENTRY FORM

**Mendocino County Fair and Apple Show**  
**P.O. Box 458 • Boonville, CA 95415 • (707) 895-3011**

NAME/FARM or RANCH \_\_\_\_\_ BREEDING PARTNERSHIP NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_ TELEPHONE (\_\_\_\_) \_\_\_\_\_

DIVISION \_\_\_\_\_ (A separate entry form MUST be used for each Division) BREED \_\_\_\_\_ DATE OF ENTRY \_\_\_\_/\_\_\_\_/\_\_\_\_

EXHIBITOR TAG NO.	CLASS	ANIMAL NAME	SEX	TATTOO, TAG, NOTCHING	BIRTH M/D/Y	REG. NO.	SIRE REG. NO.	DAM REG. NO.	ENTRY FEE	(Office Use Only) FEE PAID
1.									\$	\$
2.									\$	\$
3.									\$	\$
4.									\$	\$
5.									\$	\$
6.									\$	\$
7.									\$	\$
8.									\$	\$
9.									\$	\$
10.									\$	\$
<b>PENS/TIE STALLS _____ @ \$1.00 EA. =</b>									\$	\$
<b>TOTAL:</b>									\$	\$

Please accept the entries (property) described herein. I am the owner of the property specified herein or the representative of the owner with authorization to act as an agent and to bind owners of the property in all matters herein. I have read, understand and agree to abide by all the rules and regulations governing the fair entries as published in the original Exhibitors Handbook. I agree to indemnify, defend and save harmless the Mendocino County Fair, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all persons in connection with my participation in the Fair and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged as a result of my participation.

EXHIBITOR'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

REGISTRATION PAPERS CHECKED BY: \_\_\_\_\_ INSURANCE VERIFIED BY: \_\_\_\_\_

RECEIPT NUMBER _____	<b>For Office Use Only</b>	EXHIBITOR NUMBER _____
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