4H Entry Form—Must Be Received In 4-H Office By June 14th

NOTE: ADDITIONAL FORMS MAY BE USED AS NEEDED. RETURN ALL COPIES TO THE 4H OFFICE

Last Name Mailing Address				First Name	4-H Club Na	4-H Club Name/Lone Member * Please list if Cloverbud*		
				Telephone	Age of Exhib	Age of Exhibitor		
	Dept #	Section Letter	Class #	Ear Tag - I.D.	Description - (Class, Name, Breed	, Date of Birth of Animal)	Premium	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
1								
12								
13								
I gi	give my permission for photographs of my children and family members to be used by Cornell Cooperative Extension in publications, publicity and public displays.							
I wi	ill also be submi erintendent at i	itting the se the County	eparate "Pa / Fair.	arental Permission Form"	to the 4-H office along with this completed voi	icher if my child is exhibiting an ar	nimal or is a Junior	
				* Inco	mplete/Incorrect Vouchers will not be accepance contact the 4-H Office	ted 664-9502		
Exhibitor's Signature Date				Date	Parent's Signature		Date	
eader's Signature				 Date	Number of Animals	als For Horse Exhibitors Only # Of Stalls Reques		