

OFFICIAL JR. MEAT GOAT ENTRY BLANK

September 29 - October 8, 2023

DO NOT FAX ENTRIES!

FOR FAIRUSE ONLY	
Exhibitor No. _____	
Postmark Date _____	
Date _____	
Amount Paid \$ _____	
Deposit No. _____	

DEADLINE FOR ENTRIES - SEPTEMBER 1, 2023

NOTE: ANY EXHIBITOR WITH PREMIUMS TOTALING \$600 OR MORE WILL BE REQUIRED TO FURNISH COMPLETE W-9 BEFORE PAYMENT WILL BE ISSUED. SEE ENTRY FORM SECTION FOR W-9 FORM. EXHIBITOR WILL BE NOTIFIED WHEN TOTAL PREMIUMS HAVE BEEN DETERMINED.

I have read and understand, and in consideration for being permitted to exhibit at the Carolina Classic Fair, agree and consent to abide by the rules and regulations, including the IAFE (International Association of Fairs and Expositions) National Code of Show Ring Ethics as posted in the Show Ring Office. I further declare that all statements made are true. "I HEREBY ENTER ANIMALS AT MY OWN RISK SUBJECT TO THE RULES & REGULATIONS OF THE FAIR. I HEREBY AGREE TO RELEASE, INDEMNIFY AND HOLD HARMLESS THE FAIR AND THE CITY OF WINSTON-SALEM, ITS AGENTS, EMPLOYEES, OFFICERS AND CONTRACTORS FROM ALL CLAIMS, LOSSES, INJURIES, OR DAMAGES OF ANY NATURE ARISING FROM, BY OR TO SAID ANIMALS" (OWNER & EXHIBITOR MUST SIGN BELOW OR ENTRY WILL BE RETURNED).

ENTRY & PEN FEES

Separate entry blank for each exhibitor and each show.

Breed: _____

# _____	Pens (if postmarked on or before 09/01)	No Fee
# _____	Pens (if postmarked 09/02 to 09/11) \$10 ea.	\$ _____

Total Enclosed \$ _____

Age of Exhibitor As Of 01/01/23 _____	<table style="width: 100%;"> <tr> <td style="width: 40%;">Exhibitor: _____</td> <td style="width: 60%;">Signature: _____</td> </tr> <tr> <td colspan="2" style="font-size: small;">(Last 4 digits of social security number for each exhibitor must be provided. If not provided, <u>entry will not be accepted.</u> *See Note.)</td> </tr> <tr> <td>Social Security Number (REQUIRED): XXX-XX- _____</td> <td style="text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </td> </tr> <tr> <td colspan="2">Address: _____</td> </tr> <tr> <td style="text-align: center;">Street</td> <td style="text-align: center;">City</td> </tr> <tr> <td style="text-align: center;">State</td> <td style="text-align: center;">Zip</td> </tr> <tr> <td colspan="2">E-Mail: _____</td> </tr> <tr> <td colspan="2">Owner Signature: _____</td> </tr> <tr> <td>Farm Name: _____</td> <td>Phone: _____</td> </tr> </table>	Exhibitor: _____	Signature: _____	(Last 4 digits of social security number for each exhibitor must be provided. If not provided, <u>entry will not be accepted.</u> *See Note.)		Social Security Number (REQUIRED): XXX-XX- _____	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	Address: _____		Street	City	State	Zip	E-Mail: _____		Owner Signature: _____		Farm Name: _____	Phone: _____
Exhibitor: _____	Signature: _____																		
(Last 4 digits of social security number for each exhibitor must be provided. If not provided, <u>entry will not be accepted.</u> *See Note.)																			
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Address: _____																			
Street	City																		
State	Zip																		
E-Mail: _____																			
Owner Signature: _____																			
Farm Name: _____	Phone: _____																		

If entry is late, entry fees must accompany entry blank.

No Entries will be accepted if postmarked after 09/11.

ENTRY BLANK MAY BE COPIED IF NEEDED.

PLEASE FILL OUT COMPLETELY! (Type or print clearly)

Each exhibitor is limited to (1) one doe per class.

JR MEAT GOATS

Number of Junior Meat Goats Entered:

JR MEAT GOAT SHOWS

Class # _____	Date of Birth _____
Class # _____	Date of Birth _____
Class # _____	Date of Birth _____
Class # _____	Date of Birth _____
Class # _____	Date of Birth _____

Mail entries with check or money order to:
CITY OF WINSTON-SALEM
 P.O. BOX 68,
 WINSTON-SALEM, NC 27102
 TELEPHONE: (336)727-2236

**** PLEASE NOTE ****

Errors or omissions in premium payments must be reported to the Fair Administrative Office by December 31 or payment will not be made.

*** * HEALTH CERTIFICATES FOR OUT OF STATE ANIMALS ONLY MUST BE CHECKED BEFORE UNLOADING ANIMALS AT FAIRGROUNDS * ***

MEAT GOAT