# OFFICIAL DAIRY GOAT ENTRY BLANK
# JUNIOR DOE
## October 3 - October 12, 2025

**DEADLINE FOR ENTRIES - SEPTEMBER 1, 2025**

**NOTE: PLEASE MAKE SURE YOU COMPETE A W-9 FORM AND SEND IN WITH YOUR ENTRY FORM. THIS IS NEEDED FOR PAYMENTS TO BE MADE TO YOU AFTER THE FAIR.**

**\* \* 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.**

**FOR FAIRUSE ONLY**

Exhibitor No. _____

Postmark Date _____

Date _____

Amount Paid $ _____

Deposit No. _____

I have read and understand, and in consideration for being permitted to exhibit at the Dixie 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).

Exhibitor: _____ Signature: _____

Address: _____
Street          City          State          Zip

E-Mail: _____

Owner Signature: _____

Farm Name: _____ Phone: _____

Address: _____
(complete mailing address)

Federal Tax ID Number (REQUIRED): _____
(must be provided and correspond with Farm name or <u>entry will not be accepted</u>)

### ENTRY FEES PER ANIMAL
Separate entry blank for each exhibitor.

**Breed:** _____

\# _____ Entry fees (if postmarked on or before 09/01) $10 ea. animal    $ _____

\# _____ Entry fees (if postmarked 09/02) $20 ea. animal    $ _____

**Total Enclosed $ _____**

**LIMIT OF 20 ANIMALS PER FAMILY**

Separate entry blank must be used by each exhibitor for each breed.
No entries will be accepted unless complete informationis furnished and fees enclosed.

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

**ENTRY BLANK MAY BE COPIED IF NEEDED.**

**PLEASE FILL OUT COMPLETELY! (Type or print clearly)**

| Dept. Letter & Class # | Sex | Name of Animal | Registration # / Tattoo | Date of Birth | Name of Sire | Registration # |
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**\* \* HEALTH CERTIFICATES FOR OUT OF STATE ANIMALS ONLY MUST BE CHECKED BEFORE UNLOADING ANIMALS AT FAIRGROUNDS \* \***

*(SEE REVERSE SIDE FOR ADDITIONAL ENTRY SPACE)*

# JUNIOR DAIRY GOAT

**PLEASE FILL OUT COMPLETELY! -- (Type or print clearly)**

| Dept. Letter & Class # | Sex | Name of Animal | Registration # / Tattoo | Date of Birth | Name of Sire | Registration # |
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