

OFFICIAL BEEF CATTLE ENTRY BLANK

October 3 - October 12, 2025

DEADLINE FOR ENTRIES - SEPTEMBER 1, 2025

ENTRY BLANK MAY
BE COPIED IF NEEDED.

FOR FAIR USE ONLY

Exhibitor No. _____

Postmark Date _____

Date _____

Amount Paid \$ _____

Deposit No. _____

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

**DO NOT
FAX ENTRIES!**

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

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).

<input type="checkbox"/> <input type="checkbox"/>	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>)		
Guardian/Parent: (for Jr. Exhibitor)	_____	(signature)

ENTRY FEES

_____ Beef Cattle for Open Show \$ _____
(if postmarked on or
before 09/01) **\$15 ea.**

_____ Beef Cattle for Open Show \$ _____
(if postmarked 09/02)
\$30 ea.

_____ **Total Enclosed** \$ _____

***** 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.

No entries will be accepted unless complete information is furnished and fees enclosed.

PLEASE FILL OUT COMPLETELY! (Type or print clearly)

Dept. Letter & Class #	Sex	Name of Animal	Breed	Registration #	Date of Birth	Name of Sire

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

(SEE REVERSE SIDE FOR ADDITIONAL ENTRY SPACE)

BEEF CATTLE

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

[illegible]