

OFFICIAL SHEEP & JR. SHEEP ENTRY BLANK

October 2 - October 11, 2026

DEADLINE FOR ENTRIES - SEPTEMBER 25, 2025

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.

NOTE: JR. EXHIBITORS: I CERTIFY THAT I HAVE FITTED AND CARED FOR ANIMALS EXHIBITED FOR 60 DAYS. (MUST BE SIGNED):

Exhibitor: _____ Signature: _____

Guardian/Parent: _____
(for Jr. Exhibitor) (print) (signature)

Address: _____
Street City State Zip

E-Mail: _____

Owner Signature: _____

Farm Name: _____ Phone: _____

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

**DO NOT
FAX ENTRIES!**

FOR FAIR USE ONLY

Exhibitor No. _____

Postmark Date _____

Date _____

Amount Paid \$ _____

Deposit No. _____

ENTRY FEES PER ANIMAL

Separate entry blank for each exhibitor.

Breed: _____

_____ Animals (if postmarked on or before 09/01) **\$3 ea.**

_____ Animals (if postmarked 09/02 - 09/11) **\$6 ea.**

Total Enclosed \$ _____

Mail entries with check or money order to:

**CITY OF WINSTON-SALEM
CAROLINACCLASSICFAIR**

P.O. BOX 68
WINSTON-SALEM, NC 27102
TELEPHONE: (336)727-2236

**** PLEASENOTE ****

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

Separate entry blank must be used by each exhibitor for each breed.

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

PLEASE FILL OUT COMPLETELY! (Type or print clearly)

ENTRY BLANK MAY BE COPIED IF NEEDED.

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

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

SHEEP & JR. SHEEP

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

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