

**LIVESTOCK DEPARTMENT ENTRY FORM
RABBIT/CAVY**

PLEASE TYPE OR PRINT

EL DORADO COUNTY FAIR
P.O. Box 1537, Placerville, CA 95667
530-621-5860

Name _____ Age _____ Club _____ Project Leader Signature _____
I certify that these entries are the project of the exhibitor and are eligible to be shown in accordance with the rules of the El Dorado County Fair and the State of California.

Signature _____ Date _____ Parent Signature _____ Community Leader Signature _____
Please accept these entries subject to the Rules and Regulations published in the El Dorado County Fair Premium Book. I understand that my entries will not be accepted until the Drug Statement (market animals only) and Release & Waiver on the reverse have been signed.

Mailing Address _____ City _____ Zip _____ Phone _____ E-mail _____

Species _____ Total Number of Animals (not entries) _____ Primary Member (circle one) Yes No

DIV#	CLASS	DESCRIPTION	BREED	EAR#	MEAT	FUR	ENTRY FEE	PEN FEES

Showmanship

DIV#	CLASS	Beg	Int	Adv

**CONSULT ENTRY BOOK FOR CLASS NUMBERS, ENTRY FEES,
ENTRY CLOSING, IN-PLACE & JUDGING DATES**

Date _____
Receipt# _____
Initials _____

Total Entry Fees \$ _____
Pen Fee \$ **\$ 3**
Exhibitor \$ **\$15**
Up to two parents _____ x \$15 \$ _____
Other \$ _____
TOTAL PAID \$ _____

**LIVESTOCK DEPARTMENT ENTRY FORM
MARKET SHEEP/GOAT**

PLEASE TYPE OR PRINT

EL DORADO COUNTY FAIR
P.O. Box 1537, Placerville, CA 95667
530-621-5860

Name _____ Age _____ Club _____ Project Leader Signature _____
I certify that these entries are the project of the exhibitor and are eligible to be shown in accordance with the rules of the El Dorado County Fair and the State of California.

Signature _____ Date _____ Parent Signature _____ Community Leader Signature _____
Please accept these entries subject to the Rules and Regulations published in the El Dorado County Fair Premium Book. I understand that my entries will not be accepted until the Drug Statement (market animals only) and Release & Waiver on the reverse have been signed.

Mailing Address _____ City _____ Zip _____ Phone _____ E-mail _____

Species _____ Total Number of Animals (not entries) _____

DIV#	CLASS	CLASS DESCRIPTION	DOB	EAR TAG	USDA# (FOR MEDAL SHEEP ONLY)	ENTRY FEE	PEN FEES

Showmanship

DIV#	CLASS	Beg	Int	Adv

**CONSULT ENTRY BOOK FOR CLASS NUMBERS, ENTRY FEES,
ENTRY CLOSING, IN-PLACE & JUDGING DATES**

Date _____

Receipt# _____

Initials _____

Total Entry Fees \$ _____

Total Pen Fees \$ _____

Exhibitor \$ **\$14**

Up to two parents _____ x \$14 \$ _____

Other \$ _____

TOTAL PAID \$ _____

**LIVESTOCK DEPARTMENT ENTRY FORM
POULTRY**

PLEASE TYPE OR PRINT

EL DORADO COUNTY FAIR
P.O. Box 1537, Placerville, CA 95667
530-621-5860

Name _____ Age _____ Club _____ Project Leader Signature _____
I certify that these entries are the project of the exhibitor and are eligible to be shown in accordance with the rules of the El Dorado County Fair and the State of California.

Signature _____ Date _____ Parent Signature _____ Community Leader Signature _____
Please accept these entries subject to the Rules and Regulations published in the El Dorado County Fair Premium Book. I understand that my entries will not be accepted until the Drug Statement (market animals only) and Release & Waiver on the reverse have been signed.

Mailing Address _____ City _____ Zip _____ Phone _____ E-mail _____

Species _____ Total Number of Animals (not entries) _____ Primary Member (circle one) Yes No

DIV#	CLASS	BREED	VARIETY	BAND #	ENTRY FEE	PEN FEES

Showmanship

DIV#	CLASS	Beg	Int	Adv

**CONSULT ENTRY BOOK FOR CLASS NUMBERS, ENTRY FEES,
ENTRY CLOSING, IN-PLACE & JUDGING DATES**

Date _____

Receipt# _____

Initials _____

Total Entry Fees \$ _____

Total Pen Fees \$ _____

Exhibitor \$ **\$15**

Up to two parents _____ x \$15 \$ _____

Other \$ _____

TOTAL PAID \$ _____

LIVESTOCK DEPARTMENT ENTRY FORM

EMU/LLAMA/DOG

PLEASE TYPE OR PRINT

EL DORADO COUNTY FAIR
 P.O. Box 1537, Placerville, CA 95667
 530-621-5860

Name _____ Age _____ Club _____ Project Leader Signature _____
I certify that these entries are the project of the exhibitor and are eligible to be shown in accordance with the rules of the El Dorado County Fair and the State of California.

Signature _____ Date _____ Parent Signature _____ Community Leader Signature _____
Please accept these entries subject to the Rules and Regulations published in the El Dorado Country Fair Premium Book. I understand that my entries will not be accepted until the Drug Statement (market animals only) and Release & Waiver on the reverse have been signed.

Mailing Address _____ City _____ Zip _____ Phone _____ E-mail _____

Species _____ Total Number of Animals (not entries) _____

DIV#	CLASS	CLASS DESCRIPTION	NAME OF ANIMAL	ENTRY FEE

Showmanship

DIV#	CLASS	Junior	Int	Senior

**CONSULT ENTRY BOOK FOR CLASS NUMBERS, ENTRY FEES,
 ENTRY CLOSING, IN-PLACE & JUDGING DATES**

Total Entry Fees \$ _____

Date _____

Receipt# _____

Initials _____

RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, _____ (participant), acknowledge that I have voluntarily applied to participate in the following activities at the El Dorado County Fair (the "Fair")

I am aware that the above-described activities are hazardous activities, and I am voluntarily participating in these activities with knowledge of the danger involved, and agree to assume any and all risks of bodily injury, death or property damage. I verify this statement by placing my initials here: _____. Parent or guardian's signature initials (if under 18): _____.

As consideration for being permitted by the Fair, the County of El Dorado (the "County") and the State of California to participate in these activities and use of their facilities, I hereby agree that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives will not make a claim against, sue or attach property of the Fair, the County or the State of California or any of their affiliated organizations for injury or damage resulting from the negligence or other acts, however caused, by any director, employee, agent or contractor of the Fair, the County and the State of California or any of their affiliated organizations as a result of my participation in the activities described above. I forever release the Fair, the County or the State of California or any of their affiliated organizations from any and all action, claims, or demands that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives now have or may hereafter have for injury or damage resulting from my participation in the activities described above.

I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and a contract between myself and the Fair, the County and the State of California or any of their affiliated organizations and sign it of my own free will.

Executed at _____, California on _____, 20_____.

PARTICIPANT/RELEASOR

PARENT/GUARDIAN

Mailing Address

Mailing Address

City Zip City Zip

If you are under 18 years of age, you and your parent or guardian must sign and initial this form where indicated.

By signing and submitting an entry form the exhibitors and their agents, parents and leaders acknowledge and agree that they:

- a. understand and have read the state Rules and local fair rules;
- b. agree to abide by them;
- c. certify that all information on the entry form is true and accurate; and
- d. agree to comply with the fair's decision regarding any alleged violation of the state or local rules.

