

Open Beef Entry Form – Breeding Classes

Name _____ Address _____

Phone # _____ Farm Name _____

- | | | | |
|----------------|---------------|-------------------|----------------------|
| 1. Black Angus | 4. Simmental | 7. Shorthorn Plus | 10. All Other Breeds |
| 2. Charolais | 5. Maintainer | 8. Red Angus | |
| 3. Hereford | 6. Shorthorn | 9. Maine Anjou | |

Please indicate the breed of the animal by using one of the provided codes.

Department 3 Section 1 Breed _____ Class _____
 Animal Name _____ Birth Date _____
 Registration # _____ Ear Tag # _____
 Sire Registration # _____ Name _____
 Dam Registration # _____ Name _____
 Breeder/Handler _____

Department 3 Section 1 Breed _____ Class _____
 Animal Name _____ Birth Date _____
 Registration # _____ Ear Tag # _____
 Sire Registration # _____ Name _____
 Dam Registration # _____ Name _____
 Breeder/Handler _____

Department 3 Section 1 Breed _____ Class _____
 Animal Name _____ Birth Date _____
 Registration # _____ Ear Tag # _____
 Sire Registration # _____ Name _____
 Dam Registration # _____ Name _____
 Breeder/Handler _____

Please complete one section for each animal – one exhibitor with a maximum of three animals per page. If you are only entering one animal DO NOT SEPARATE FORM. We will not accept this form if it is not completely filled out. No blanks should be left or the animal will not be entered.

There is a \$1.00 per animal entry fee – Please make all checks payable to Wayne County Fair.

Submit forms by July 1, 2024 to:
Wayne County Fair
270 Miller Drive
Honesdale PA 18431

Approved By: _____
 Initials

Animal Owner or Caretaker's Verification of Veterinarian – Consultation – Relationship (VCR) statement for the animals being exhibited:

I attest and affirm that a veterinarian consultation relationship – as that phrase is defined in the Animal Exhibition Sanitation Law found at 3 Pa.C.S.A. § 2501 et seq. and any amendments thereto – exists with regard to any animals I will be exhibiting.

**Exhibitor or Caretaker's
Signature: _____**

Date Signed _____

Veterinarian's Name: _____