

Quay County 4H/FFA Youth Expo Junior Livestock Entry Form

Entry Deadline: July 30, 2024

_____. (Check here if entering animals under family name. A separate form must still be completed for each exhibitor

Exhibitor: _____

Address: _____ City _____ Zip _____ Phone: _____

Exhibitor Date of Birth: _____ Age on Entry Deadline (07/30/24) _____

4-H Club and/ or FFA Chapter (if applicable): _____

Market Swine

Tag # (last 5 digits)	County Bred	Breeder
12-345 (example)	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	

Meat Goat

Tag # (last 5 digits)	County Bred	Breeder
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	

Market Lamb

Tag # (last 5 digits)	County Bred	Breeder
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	

Breeding Heifer

Tag # (last 5 digits)	County Bred	Breeder	DOB
	Yes No		
	Yes No		
	Yes No		
	Yes No		

Market Steer

Tag # (last 5 digits)	County Bred	Breeder
	Yes No	
	Yes No	
	Yes No	
	Yes No	

**FIRST YEAR FEEDERS:
ONLY CHECK THE
BOX IF THIS IS THE 1ST
YEAR YOU HAVE
FEED/SHOWN
THE SPECIES.**

SPECIES	QTY	\$/ head	TOTAL	FIRST YEAR FEEDERS	YES
Market Lambs	X	\$6 =	\$	Market Lamb (check box)	
Showmanship (Lambs)	X	\$5 =	\$		
Market Goats	X	\$6 =	\$	Market Goat (check box)	
Showmanship (Goats)	X	\$5 =	\$		
Market Swine	X	\$6 =	\$	Market Swine (check box)	
Showmanship (Swine)	X	\$5 =	\$		
Market Steers	X	\$15 =	\$	Market Steers (check box)	
Breeding Heifer	X	\$15 =	\$	Breeding Heifers (check box)	
Showmanship (Beef)	X	\$5 =	\$		
		GRAND TOTAL	\$		

I (we) hereby make application to enter the named animals, for a premium, in the classes at the Quay County Fair, subject to rules and regulations of your Fair, as published, all of which I (we) have read, and agree to the provisions contained therein as part of this contract. I (we) hereby certify that the described animals were fed and conditioned by exhibitor and are eligible to be shown in accordance with the rules of the department.

The use of medication is subject to the manufacturer's label and FDA approval. It is the responsibility of exhibitors and those who may assist them to ensure that all medications are used properly and that withdrawal times are followed prior to slaughter. Exhibitors of sale animals will be required to sign this disclosure statement. Failure to sign this disclosure statement will forfeit your right to participate in the sale. Exhibitors must advise Superintendents prior to administering medications at the Fair,.. An exhibitor may utilize any medications so long as it has FDA approval for its use on the specific animal and situation, and so long as withdrawal times are adhered to before slaughter.

I (we) understand that if entering animals under a family name, individual exhibitor for each animal must be declared prior to the animal being weighed.

****All livestock must be on the Quay County Fairgrounds by 8:00 am on Wednesday, August 7, 2024.**

Exhibitor Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

4-H or FFA Advisor Signature: _____ Date: _____

OR (if exhibitor is under 9yrs and not showing through 4H)

Fairboard Member Signature: _____ Date: _____