

A SEPARATE ENTRY FROM MUST BE SUBMITTED FOR EACH PERSON/PREMIUM CHECK AND INFORMATION MUST BE ENTERED AS YOU WOULD LIKE THE PREMIUM CHECK MADE OUT

HEALTH PAPERS AND REGISTRATION PAPERS MUST COME WITH THE ANIMALS

Dairy Cattle Entry Form (C)

DELAWARE COUNTY FAIR, Walton, New York

NOTE: **Read the rules and regulations section for the fair and rules and regulations for the department.** Send all entry forms to Superintendent Jerry Merrill, 27294 State Hwy 206, Downsville, NY 13755, or e-mail to jpmerrill55@gmail.com by July 23, 2021. (Postmarked or Date Stamped) "I hereby authorize you to enter the following exhibits in my name to compete according to the rules and regulations outlined in the fair book"

Name _____ Address _____

City _____ State _____ Zip _____ Phone _____

Email: _____

Breeder Points to: _____ Exhibitor Points to: _____

	Breed Class	Milking Parlor Date of Birth	Animal Name Sire Name information must be entered exactly as it appears on registration papers	Owner (information must be entered exactly as it appears on registration papers) Breeder (information must be entered exactly as it appears on registration papers)
1	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
2	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
3	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS :	DOB:	Sire:	B:

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4	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
5	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
6	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
7	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
8	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
9	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
10	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:

11	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
12	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
13	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
14	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
15	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:

16	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
17	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
18	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
19	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:

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20	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
21	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
22	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
23	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:
24	Breed: DROP DOWN BOX FOR BREED	MP: <input type="checkbox"/> Y <input type="checkbox"/> N	Name:	O:
	Class: DROP DOWN BOX FOR CLASS	DOB:	Sire:	B:

Cattle will not be allowed to enter the barns until Vets have cleared them.

Cattle will be checked in on Saturday, August 14 from 11 a.m. – 8 p.m., Sunday, August 15 from 8am – 6pm and Monday, August 16 from 8am – 5 pm.

Stalling Requests and Day and approximate time of arrival: Day _____ Time _____