

Name _____
Address _____
City _____
Phone _____ Zip Code _____
Email _____

Solanco Fair Dairy Entry Form

Sheri Teaman
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Quarryville, Pa 17566
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(Please type or print clearly)

ONE BREED PER PAGE PLEASE.

LATE ENTRIES MAY BE REFUSED

Do you need signs made? Yes _____ No _____ (Please check one) ****Entry forms must be used****

Owner: _____ Exhibitor's Age: _____
Animal's Name: _____ Breed: _____
Birth Date: _____ Class: _____
Sire: _____ Dam: _____
Breeder: _____ Barn Ear Tag/ Tattoo # _____
Division Entered: (Circle one only) Open 4-H FFA Dept 11 (Jr. Open not in 4-H or FFA)
Group Class (circle all that apply) 16 17 18 (see enclosed premium list for class number)

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****Additional forms can be found at www.SolancoFair.org Dept 2 Dairy cattle****