

ENTRY FORM FOR ALL LIVESTOCK
EARLY ENTRIES DUE BY AUGUST 26, 2016

Send Payment and Registration to : Marion County Fair and Livestock Show, PO Box 356, Summit, AR 72677 Attn: David Ezell

Name of Exhibitor _____

Division: Youth or Open (Adult)

Address _____

Phone: _____

Dept.	Class	Date of Birth	Breed	Sex	Name of Animal	Registration Number

I agree to abide by all the rules and regulations of the Marion County Fair and Livestock Show. I agree to forfeit all premiums and suffer any consequences that may result due to my misconduct.

Signature of Exhibitor

Parent's Authorization, if minor