

Bx 158, 50 Arthur St. Perth, ON K7H 3E3 Phone 613-267-4104 Fax 613-466-0432

E-mail: office@perthfair.com

Cattle/Goat ENTRY FORM

Name_					OFFICE USE ONLYRING #							
Address Town/Postal Code												
Phone					The undersigned proposes to exhibit the articles named on this entry							
1st time entering YES NO						 form at the Perth fair and does hereby certify that the said articles are entered in accordance with the Rules and Regulations contained in the prize book and agrees to be governed by these said rules and regulations. 						
		_										
If NO has your address changed YESNO					Signature of exhibitor							
Email: Would you like to receive future Prize Lists by email? Yes No						Each exhibitor must have his/her own entry form. This form can be brought, mailed, faxed or emailed to the fair office, between Aug. 1 - 19.						
Insurance Company			Policy #		Expiry Date DD/MM/YY BREED						BREED	
Required Information			**Required Information		**Required Information**							
#	Class	Sec-	Name of Anima	1	Office	Dec #	Car		Γαττοο		Date of Birth	
#	Class	tion	Name of Anima	l	Use	Reg. #	Sex		ιαττοο		MM/DD/YY	
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Due to time constraints we are unable to call back to confirm receipt of entry form forms.