

Date Received: _____

CAVY FAIR ENTRY FORM

Return to: Niagara County 4-H Attn: Heidi
4487 Lake Avenue
Lockport NY 14094

Return by: **July 2nd**

Note: animals' ear tattoo and sex are checked with entry forms the day they are turned in.

Please check one: _____ 4-H Member _____ Cloverbud Member

Name: _____ Telephone: _____

Address: _____
Number & Street City Zip

Date of Birth: _____ Age as of 1/1/current yr: _____ Years in 4-H: _____

Club Name: _____ Or individual member: _____

Number of years you have participated in the 4-H Cavy project: _____

Use the Premium Book to fill out this form.

Class #	Ear #	Breed	Variety	Sex	Sr.	Int.	Jr.

Showmanship: Beginner _____ Junior _____ Senior _____

Sow & Pup Class: List Sow's Ear # from above here _____

Best bred by Exhibitor: Yes No Costume Class: Yes No

Posters: Yes No Exhibitors Judging: Yes No

It is hereby understood and agreed that animals are entered at the owner's risk, and the show committee will not be responsible for entries; though all due care will be used to protect them. I make the above entries subject to the rules of the Niagara County Fair Rabbit & Cavy Show.

Signature: _____

Additional forms are available from the 4-H Office or from your Rabbit/Cavy County Project Leader.