Niagara County 4-H Swine Auction Entry Form

4-H Member’s Name: ____________________________________________

Address: _____________________________________________________

Home #: ___________________    Cell #: _______________________

4-H Club Name or Individual Member: ______________________________

Animal Breed Type ___________________    Tag I.D. #: ____________

Date of Birth of 4-H Project Animal: ______________________________

Weight of 4-H Project Animal when purchased: ______________________

We have read the General Rules of Niagara County 4-H Swine Sale. We understand them fully and agree to abide by them:

4-H Member: __________________________________________________

4-H Parent/Guardian: __________________________________________