

Lamb Show Entry Form

Entry Forms Due by September 24, 2021

Please Mail To: DeKalb County VFW Fair: P.O. Box 680776 Fort Payne, AL 35968

Name of Exhibitor: _____

Age on day of show: _____

Address: _____ City: _____

State: ____ Zip: _____ Phone Number: _____

Total Market Lambs: _____

Total number of animals: _____ x \$10 = _____

Exhibitor Entry Statement: Bring health papers on show date if needed. Necessary papers are listed under Divisions for the different livestock. Exhibitor agrees to abide by all rules and regulations as listed in the fair catalog. There will be a \$10.00 entry fee per entry for the Open Beef Show.

Exhibitor's Signature _____ Date _____