

NON REGISTERED/COMMERCIAL/ALL OTHER BREEDS

Birthdate	_____
Age	_____
Grade	_____

**SOUTH FLORIDA FAIR
OFFICIAL ENTRY FORM
COMMERCIAL/ ALL OTHER BREEDS**

Mail Entries to:
LIVESTOCK DEPARTMENT
SOUTH FLORIDA FAIR
P. O. BOX 210367
WEST PALM BEACH, FL 33421-0367

EXHIBITOR _____ Youth Ethics # _____

Address _____ Farm/Ranch Name _____

City _____ State _____ Zip _____ Address _____

COUNTY _____ Telephone _____ / _____ City _____ State _____ Zip _____

Parent/Guardian's Email _____ **MANDATORY** Social Security # _____ - _____ - _____

Most correspondence in regard to the shows is conducted through the parent or guardian's email address.

Emergency Contact Name and Number _____

Office Use	Youth Class #	Animal Name	Sex	Date of Birth	Owner
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ENTRY FEES

Please read and sign on reverse side of this form.

_____ **Beef X \$12.00 each animal = TOTAL \$** _____

ALL FORMS MUST BE SIGNED OR WILL BE RETURNED TO EXHIBITOR

(Please read and sign as designated)

By signing this entry form, I (we) agree to indemnify and to hold harmless the SOUTH FLORIDA FAIR & PALM BEACH COUNTY EXPOSITIONS, INC., its agents and employees, against any and all liability for injuries to persons or damage to property, whether such damage or injury is from the SOUTH FLORIDA FAIR & PALM BEACH COUNTY EXPOSITIONS, INC.'s negligence or not, which may arise by reason of use by signing exhibitor(s) of the SOUTH FLORIDA FAIR & PALM BEACH COUNTY EXPOSITIONS, INC.'s property.

I have read and understand, consent to, and agree to abide by the IAFE (International Association of Fairs and Expositions) National Code of Show Ring Ethics and the rules and regulations of the market animal competition as stated in the Premium Book of the South Florida Fair.

The undersigned specifically releases and forever discharges the Fair, its officers, Trustees, Directors, employees, and all persons connected directly or indirectly with the operation of the Fair from any liability for libel, slander, loss, damage, breach of contract, negligence or other tort, harm, damage to property, injury or death suffered by me which may occur during or as a result of participation by me in the Fair.

Exhibitor Signature (Owner, Exhibitor, Fitter, Trainer or absolutely Responsible Person)	Exhibitor Name (Print)	Date
Guardian or Parent's Signature	Guardian/Parents name (Printed)	Date

*** Attention Youth - You MUST have attended the Mandatory YOUTH LIVESTOCK SHOW ETHICS AND ANIMAL CARE WORKSHOP in order to show an animal at the South Florida Fair.

PLEASE MAKE SURE YOU HAVE THE FOLLOWING FILLED OUT BEFORE SUBMITTING YOUR ENTRY:

- 1. Parent/ Guardian's Email address**
- 2. Exhibitor's Social Security Number**