Fort Bend County Fair
2020 Turkey Entry Form

Order Deadline: March 19, 2020

$20.00 Entry Fee Per Division & Poultry Order Fees Must accompany this form

Committee/Office Use

Amt Pd: $ _____

Cash _____ Card _____ Ck #_____

Rec'vd by: _____

Exhibitor's Name:_____

Mailing Address:_____ City:_____ Zip:_____

Physical Address:_____ City:_____ Zip:_____

DOB:_____ Age: (year showing)_____ **Quality Counts Verification Code #**_____

Phone:_____ Email:_____

Parent/Legal Guardian's Name:_____

Guardian Cell:_____ Guardian's Email:_____

Complete School Name: (year showing)_____ Grade: (year showing)_____

Club/Chapter Name:_____

Leader/Advisor Name:_____ Email:_____

Leader/Advisor Phone:_____ **Leader/Advisor Signature**:_____

Family Tag: **YES** or **NO** Family Members:_____

Physical Address where animal(s) will be housed:_____

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- Order in increments of 10 poults
- Minimum order of 10 poults per exhibitor
- Maximum order of 50 poults per exhibitor

Number of turkey poults ordered: _____

Price per poult: $5.60

(10 poults = $56.00)

Entry Fee $ 20.00

Total Cost of Poultry $_____

Total = $_____

Each Exhibitor must have a 2020 notarized Exhibitor/Participant Release of Liability and W-9 in the exhibitor's name on file at the Fair Office. Only one (1) is needed per exhibitor not per entry.

The undersigned hereby consents and agrees that the animal described on the entry form may, at the discretion of the Fair management, be tested for unauthorized use of medication or drugs. Exhibitor and Parent/Guardian states that they have read, understand and agree to abide by all the General Rules and Regulations of the Fort Bend County Fair, the 2020 Fort Bend County Fair General Livestock Rules and Regulations and the 2020 Fort Bend County Fair Division Rules for each species entered. I understand that auction checks will not be released until Buyer thank you notes and required paperwork, including a signed disposition sheet, are turned into the Fair Office.

_____ _____

Exhibitor Signature **Parent/Guardian Signature**

_____ _____

Date Parent/Guardian Name Printed