

Return Entry Form & Check for All Fees Payable To:

AMERICAN LEGION COUNTY FAIR

P O Box 147, 883 North Julian St.
Ebensburg, PA 15931

Registration: \$5.00 per head. Registrations are not accepted without the entry fee. All fees are non-refundable. Registrations submitted after July 15th will not be accepted. Substitutions / Changes Will Not Be Accepted After August 15th

For each animal registered but not exhibited a penalty of \$25 will be charged to the exhibitor. **Entries that are cancelled on or before Aug. 15th, must be of written notification to ccfair.verizon.net** and will not be penalized.

The exhibitor is responsible to clean stalls **daily** and upon the exit of your animal. **Failure to comply will result in premium checks being held.**

Entries will be released from the barn at 5 pm the last Saturday of fair week. Stall decorations must remain on display and maintained until the animals leave the grounds.

Each exhibitor is responsible for lanyard registrations. Lanyard form links are located on our website <https://cambriacofair.com/> or <https://sites.google.com/view/american-legion-co-fair/home> If you have any problems accessing these sites please email us at **ccfair@verizon.net**.

The registration now has payment enabled online and is required during the order process. Pick up will be at the fair office Saturday August 17th 12 to 2 pm. or Aug. 19 - 23 Monday thru Friday 9 to 4 pm.

In/Out vehicle passes will be handled by Tim Mullen directly and not at the fair office.

The exhibitor is responsible for providing a Complete Name and mailing Address. Premium checks will be held at the fair office due to illegible / insufficient addresses. Returned checks will not be reissued.

IT IS MY RESPONSIBILITY AS AN EXHIBITOR TO READ AND BE AWARE OF ALL RULES AND REGULATIONS

I Agree to Abide by the Code of Show Ring Ethics & Understand that all Judge Decisions Are Final

Name: _____ Phone: _____

Address: _____

City: _____ State, Zip: _____ Age: _____

If Applicable - Parent/Guardian: _____

I attest and affirm that a "Veterinary Client Patient Relationship" at 3 Pa. C.S.A. §2501 et seq. and any amendments thereto" exists with regard to any animals I will be exhibiting.

(Must be included - PLEASE PRINT)

Vet Name: _____ Phone #: _____

Department - 2

DAIRY CATTLE

I understand as an exhibitor I am solely responsible for any loss, injury, damage done or occasioned by or arising from any exhibit I have entered. I shall indemnify and hold harmless the American Legion County Fair against such loss, injury or damage.

| Depart. | Section | Class | TAG #'s | Breed | Articles: Use Wording-Premium Book | Fees |
|--------------|---------|-------|---------|-------|------------------------------------|-----------|
| 10 | 204 | 38 | -- | -- | Stall Decorations | -- |
| 2 | 2 | 29 | -- | -- | Supreme Champion | -- |
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| TOTAL | | | | | | \$ |

I understand it my responsibility to care for my animal throughout fair week.

AS PER THE BOARD OF DIRECTORS, exhibitors violating the Livestock General Rules, Open Class or Department 10 Livestock Rules, will result result in the following disciplinary actions.

- 1. Exhibitor will be given a verbal warning.
- 2. Exhibitor will be given a written warning.
- 3. Exhibitor will be pulled from the class/show.

It is the responsibility of the Superintendent to confer with the Office/Fair Board upon taking action

(Signature of Exhibitor)

DATE: _____

Please check if these cattle are also being entered as a Department 10 Project.

(Signature of Parent/Guardian)

DATE: _____