

**LLAMA & ALPACA**  
**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**  
**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

Lot #	Animal Identification (ear tag #, tattoo, etc.)	Breed	Animal Birth Date

Total number of animals \_\_\_\_\_

Judging Contest entering \_\_\_\_\_

By signing this entry form, I agree to abide by the rules set forth by the Hartford County 4-H Fair Association. I understand that the Hartford County 4-H Fair Association assumes no liability, legal or otherwise for any injuries or damages that may occur. I have also thoroughly read ALL of the rules as listed in the Hartford County 4-H Fair Premium Book. **Advance entry is mandatory. NO PREMIUMS WILL BE PAID ON LATE ENTRIES.**

4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_

**RABBITS**

**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**

**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

Lot #	Animal Identification (ear tag #, tattoo, etc.)	Breed/Type of Animal	Animal Birth Date

Total number of animals \_\_\_\_\_

# regular cages needed \_\_\_\_\_ # litter cages needed \_\_\_\_\_

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Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_

**BEEF**

**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**

**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

Lot #	Animal Identification (ear tag #, tattoo, etc.)	Breed	Animal Birth Date

Total number of animals \_\_\_\_\_

Judging Contest entering \_\_\_\_\_

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4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

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**SHEEP**

**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**

**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

Lot #	Animal Identification (ear tag #, tattoo, etc.)	Breed	Animal Birth Date

Total number of animals \_\_\_\_\_ # pens needed \_\_\_\_\_

Judging Contest entering \_\_\_\_\_

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4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_

HARTFORD COUNTY 4-H FAIR

**DAIRY**

**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**

**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_ Birth Date \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

**Fitting & Showmanship** (circle appropriate class) **Novice** (never shown before) · **Junior** (7-12) · **Senior** (13-19)

**Circle the judging contest you are entering:** Dairy or Livestock

Lot #	Breed	Identification (ear tag#, tattoo, etc.)	Animal D.O.B	Spring Heifer Calf	Winter Heifer Calf	Fall Heifer Calf	Summer Yearling Heifer	Spring Yearling Heifer	Winter Yearling Heifer	Fall Yearling Heifer	Junior 2 yr olds	Senior 3 yr olds & older	Dry Cows	Dam & Daughter

Total number of Dairy animals \_\_\_\_\_

Indicate identification # for animal to be used for showmanship class \_\_\_\_\_

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4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_

**POCKET PETS**

**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**

**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

Lot #	Animal Identification if applicable (ear tag #, tattoo, etc.)	Breed/Type of Animal	Animal Birth Date

Total number of animals \_\_\_\_\_ # show boxes \_\_\_\_\_

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4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_

**SWINE**

**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**

**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

Lot #	Animal Identification (ear tag #, tattoo, etc.)	Breed	Animal Birth Date

Total number of animals \_\_\_\_\_ # pens needed \_\_\_\_\_

Judging Contest entering \_\_\_\_\_

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4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_

**POULTRY**

**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**

**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

Lot #	Animal Identification (ear tag #, tattoo, etc.)	Breed/Type of Animal	Animal Birth Date

Total number of entries \_\_\_\_\_ Indicate # cages needed below:

Bantam \_\_\_\_\_ Standard \_\_\_\_\_ Pairs \_\_\_\_\_ Trios \_\_\_\_\_

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4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_



**WORKING STEER**

**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**

**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

Lot #	Animal Identification (ear tag #, tattoo, etc.)	Breed	Animal Birth Date

Total number of animals \_\_\_\_\_

Judging Contest entering \_\_\_\_\_

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4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_

**DAIRY GOATS**

**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**

**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

Lot #	Animal Identification (ear tag #, tattoo, etc.)	Breed	Animal Birth Date

Total number of animals \_\_\_\_\_ # pens needed \_\_\_\_\_

Judging Contest entering \_\_\_\_\_

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4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_

**DOG**

**Please mail to: Carol Ann LeBlanc, 784 Mather Street, Suffield, CT 06078**

**Deadline: AUGUST 1<sup>st</sup>**

Name of Exhibitor: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Exhibitor's age (as of Jan. 1): \_\_\_\_\_ Phone #: \_\_\_\_\_

Complete Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

County enrolled: \_\_\_\_\_ Club Name: \_\_\_\_\_

Number of years dog showmanship experience? \_\_\_\_\_ Is this your very first show ever? Yes No

Primary Dog's Call Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Will this dog be used by another 4-Her at this fair? Yes No

Will you show an alternate dog at this fair? Yes No

(If yes to either of these, please copy and fill out an entry form for each exhibitor/dog combination)

If exhibitor is showing another species at the fair, please list: \_\_\_\_\_

**All exhibitors will be automatically entered in the Dog Knowledge Event.**

Are you entering "Introduction to Showing"? Yes or No (If yes, you may not enter any showmanship or obedience classes.)

Please write the name of the class you are entering for the dog listed on this entry.

Showmanship (only 1 class)	Obedience (see rule #16)

Please list the Gymkhana classes you would like to enter:


*Health paperwork and a copy of the Verification Form MUST be submitted with this entry form!*

By signing this entry form, I agree to abide by the rules set forth by the Hartford County 4-H Fair Association and the Hartford County 4-H Fair Dog Show. I understand that the Hartford County 4-H Fair Association assumes no liability, legal or otherwise for any injuries or damages that may occur. I have also thoroughly read ALL of the rules as listed in the Hartford County 4-H Fair Premium Book. **Advance entry is mandatory. NO PREMIUMS WILL BE PAID ON LATE ENTRIES.**

4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_

**PRODUCE, UTILITY & PET GOATS**  
**Mail to: Emily Syme, 72 Windsorville Road, Broad Brook, CT 06016**  
**Deadline: August 1**

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City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

Town where animals are kept \_\_\_\_\_

Lot #	Animal Identification (ear tag #, tattoo, etc.)	Breed	Animal Birth Date

Total number of animals \_\_\_\_\_ # pens needed \_\_\_\_\_

Judging Contest entering \_\_\_\_\_

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4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

*For office use only: Date received:* \_\_\_\_\_

**BOOTHS & DEMONSTRATIONS**  
**Mail to: Halie Shea, 14 Sherwin Lane, Windsor Locks, CT 06096**  
**Deadline: August 1**

Name of Exhibitor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Club Name \_\_\_\_\_

	Lot #	Title of Booth or Demonstration
<b>BOOTH</b> Size:		
<b>BOOTH</b> Size:		
<b>DEMONSTRATION</b>		
<b>DEMONSTRATION</b>		

I understand that I must provide my own booth.      Circle one: Individual   or   Club

Demonstration date and time preferred is: \_\_\_\_\_

***You will be called to confirm the date and time you will be scheduled for.***

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4-H Exhibitor's signature: \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_

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