North Dakota State Fair Rabbit Shows ♦ ARBA ♦ Open Class ♦ 4H ♦ FFA

Name _____ Phone _____

Address _____ SS # _____ { } Check here if under 21 years of age

City, State, Zip _____ County _____

For more information about the Fair, please include your E-mail _____

Entry Form Due July 8, 2008 ♦ Return to: ND State Fair ♦ PO Box 1796 ♦ Minot ND 58702 ♦ Fax: 701-857-7622

Show Dates: Saturday, July 19 ARBA Open & Youth ◦ Sunday, July 20, ARBA Open & Youth ◦ Wednesday, July 23, Open Class, 4H & FFA

Website: www.ndstatefair.com

Directions For Filling in forms: Please follow all same breed and varieties together starting with Bucks Senior, Intermediate, Junior. Please follow ARBA 4 Class and 6 Class guidelines. Skip a line between breeds. Mark the columns of the shows you want to enter each rabbit in. You may enter each animal once in each show each day. You may not show the same animal in both youth and open in the same show. You may not show the same animal in 4-H and FFA. Entry Fees are as follows $2 for each show on Saturday And Sunday, $1 for the open show on Wednesday. No fee for 4-H or FFA.
The example below is for a Havana Buck over 8 months of age.
Comment cards for The ARBA shows on Saturday, Sunday and Wednesday **Must be filled out by Exhibitor** and turned in to Show Secretary at least **1 hour before show.** Comment cards available at registration table.

Open Class Lot #	4H Lot #	FFA Lot #	Breed Class	Variety/Color	Ear # Tatoo	Sex - B/D	Jr/Int/Sr	Sat 1 Open	Sat 1 Youth	Sat 2 Open	Sat 2 Youth	Sat 3 Open	Sat 3 Youth	Sun 1 Open	Sun 1 Youth	Sun 2 Open	Sun 2 Youth	Sun 3 Open	Sun 3 Youth	Total Fees
1			**4L**	**Black**	**EX**	**B**	**Sr**	**X**			**X**		**X**		**X**			**X**		**$11**

** Method of Payment: Check OR Charge my
VISA MC DISCOVER

__ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __

(3 digit code located on back of card) __ __ __ Exp Date _____

Signature _____
(Required if using a credit card)

Total Entries $ _____
People Pass x $20 $ _____
4H/FFA Pass x $5 $ _____
Vehicle Pass $2/day $ _____
LIMIT ONE VEHICLE PER FAMILY
Circle Days Needed: July 18, 19, 20, 21, 22, 23, 24, 25, 26

TOTAL $ _____

"Exhibitor Entry Statement: I hereby certify that I have reviewed and accept the rules established by the Fair Association in the premium list. Premium payment cannot be made to an exhibitor who does not furnish a social security number. 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 as stated in the premium list of this event."

X_____ Date _____
(Exhibitor)

X_____ Date _____
(Jr. exhibitors must have parent/guardian's signature here)

Receipt # _____

Amount Paid $ _____

X_____ Date _____
County 4-H Extension Agent—I certify the above name to be a member in good standing

X_____ Date _____
FFA Advisor—I certify the above name to be a member in good standing