



PO Box 250
Blackfoot, ID 83221

DAIRY GOATS ENTRY FORM

Exhibitor Name: _____

Address: _____

City: _____ State: _____

Zip: _____ County: _____

Phone #: _____

Email: _____

I hereby certify that the following animals are entered for exhibition strictly in accordance with the rules and regulations of the Eastern Idaho State Fair as contained in the current Exhibitors Handbook. By signing below I hereby release the E.I.S.F. from any liabilities for loss, damage or injury to any person, livestock or any other property.

Exhibitor Signature _____



NAME ON CC : _____ CC#: _____ Exp. Date: _____ CVS: _____

W-9 FORM: ALL LIVESTOCK EXHIBITORS MUST FILL OUT AN IRS W-9 FORM. PREMIUMS WILL NOT BE PAID UNTIL AN IRS W-9 FORM IS COMPLETED.
 REGISTRATION PAPERS: MUST HAVE REGISTRATION PAPERS BY 5:00 PM ON TUES IN ORDER TO SHOW

(office use only) Date _____
[] PAID IN FULL Amount Paid _____
CASH [] or CREDIT CARD []

ENTRY NO.: _____ (OFFICE USE ONLY)

ENTRY FEE:

How many Classes: _____ x \$5 = _____

How many Group Classes: _____ x \$5 = _____
Group Classes per entry maximum of 4 per pen

GATE PASSES

Exhibitor Full Week Pass: _____ x \$20 = _____

Exhibitor 1/2 Week Pass: _____ x \$10 = _____

- Exhibitor can purchase only 1 Pass
- Caretaker 1 Pass per 4 animals entered

SHAVINGS:

of bags: _____ x \$12 = _____

LATE FEE: A \$10 late fee will be added after the entry due date of Friday, August 16, 2024. NO EXCEPTIONS.

Late Fee: _____

(NO CHECKS ACCEPTED)

TOTAL = _____

NO.	DIV.	CLASS	NAME OF ANIMAL	REGISTRY #	BIRTH DATE	BREED	NAME OF BREEDER	NAME OF OWNER