| Name | ENTRY FORM | ENTRY FEE: |
|--|--|---|
| Address | PO Box 250 Blackfoot, ID 83221 | How many Classes x \$5 = (Group Classes per entry maximum of 4 per pen) |
| City State Zip County | [] W-9 FORM: ALL LIVESTOCK EXHIBI-TORS | |
| Phone # | WILL NOT BE PAID UNTIL AN IRS W- 9 FORM IS COMPLETED. | Exhibitor Full Week Pass x \$20 = Exhibitor 1/2 Week Pass x \$10 = |
| 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, | [] REGISTRATION PAPERS: MUST HAVE REGISTRATION PAPERS BY 5:00 PM ON SATURDAY IN ORDER TO SHOW | Caretaker 1 Pass per 4 animals entered LATE FEE: A \$10 late fee will be added after the entry due date of August 16, 2024. NO EXCEPTIONS. |
| Exhibitor Signature | (office use only) PAID IN FULL [] Cash [] or Credit Card [] or Other | Late Fee \$10 = (NO CHECKS ACCEPTED) TOTAL DUE \$ |
| NAME ON CC: | CC# | Exp. Date:CVS: |

EXHIBITOR #:

| DEPT | DIV. | CLASS | NAME OF ANIMAL | REGISTRY # | BIRTH DATE | SEX | BREED |
|------|------|-------|--|------------|---------------|-----|-------|
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