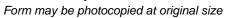


Exhibitor's Signature \_\_\_\_\_

## **South Dakota State Fair**

890 3rd St. SW Huron, SD 57350 (605) 353-7340 or (800) 529-0900

## 2016 Entry Form for Rabbits





	Premi	um Sho	ow Registration DeadlineAug	ust 01, 2016								
	After A	ugust	1st ALL fees will be doubled									
			Date of Achievement days_									
			will NOT be doubled									
	Please use separate entry blank for each exhibitor and/or owner											
	Exhibitor No											
	(off	ice Use O										
I.	(Please P	rint in INK	or Type)									
	Owner Na	ıme										
	Address _		C	City	State Zip_							
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			xhibitor as printed on entry blank & fee s		& be the same name as o	n the breed						
	_		s & must correspond with SSN or tax ID	number.								
	Please u	se separ	ate entry blank for each Department									
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	Departm	ent Enter	red	lotal Number of An	imals in Department							
	Division	Class		Log Dond or Totton		<del></del>	Check					
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			m Booklet.	is stated in the								
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	Lagree to	he gove	erned by rules and regulations establish	hed by the State Fair								
			clare that all statements made in conne									
	exhibits are true and correct											
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Name   Name   Name of Breed and Variety   Pigeons & Rabbins   Description of Entry   Entry Fee   14-H	Division Class Leg Band or Tattoo							Check
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