Poultry

Name of Exhibitor:_____

Mailing Address:_____City_____ State: _____Zip_____Phone_____

Youth(DOB)_____Youth Class_____Open Class_____ No. of Animals Entered:_____No. of Cages: _____

Email Address: _____

Class	Lot #	Breed	Ck	Hen	Ckl	Plt	Btm/ Std	Awd	Amt