GOAT DOCUMENTATION FORM - 2019

This form must be filled out and provided to the applicable species superintendent or their designee upon check-in at the fairgrounds.

Exhibitor Nam	e				Male Female
Exhibitor Date	of Birth	Month	Day _	Year (used	to determine exhibitor eligibility)
Address				City	
Zip	Phone				
Text messages	and email will or	nly be used if nee	ded to contac	ct the exhibitor relat	ed to their exhibits.
Parent/Guardia	ın Name(s)				
lame of Anima	I Owner:				
Address of Ani	mal Owner (if diff	ferent from exhibitor)_			
Inimal Owner	Contact Phone				
PREMISE I.D. #	#				
DEED	GOAT #1	GOAT #	:2	GOAT #3	GOAT #4
REED					
ENDER oe/Buck/Weather)					
IRTH DATE					
CRAPIES ID					
THER ID #					