PLEASE USE ONE ENTRY BLANK PER EXHIBITOR

Illinois State Fair
JUNIOR RABBIT
ENTRY BLANK

Entries Must Be **Postmarked** by July 1

RETURN FORM AND FEES TO:
ILLINOIS STATE FAIR
COMPETITIVE EVENTS
P.O. BOX 19427
Springfield, IL 62794-9427
Phone: 217-782-0786

ENTRY MUST BE VERIFIED BEFORE MAILING

Exhibitor must have their FFA Advisory or 4-H Extension Unit Office representative verify their enrollment by signing below. By signing this form I verify the exhibitor is enrolled in the FFA or 4-H Program and the project area in which the exhibitor is submitting Illinois State Fair entries.

Signed _____ **Date:**_____

FFA Advisor or Extension Representative

CONDITION OF ENTRY

By signing this form, I certify that I have read the contents of the Premium Book, including the section entitled Ethical Care and Exhibiting of Animals, and that I will abide by all applicable rules and guidelines contained therein, including specific rules relating to the administration of drugs to animals, as well as all other rules relating to the Illinois State Fair and the laws and regulations of the State of Illinois.

_____

Parent/Guardian Signature Date

_____

Exhibitor's Signature Date

IMPORTANT: SEE JR. PREMIUM BOOK FOR LIST OF RULES

Birth Date: Mo._____ Day _____ Year _____

Name of Exhibitor_____

Address, Street or RFD _____

City or Town _____ Zip_____

Telephone Number _____

Email _____

Social Security # (First Time State Fair Exhibitors ONLY) _____

Name of FFA Chapter or 4-H Club _____

Name of FFA Instructor or 4-H Leader_____

County_____

_____ Rabbits……..per head ($1.00) _____

_____ Rabbit Meat Pens…….per pen ($3.00) _____

_____Admission Books (13-59)..each ($45.00) _____

_____Auto Sticker……..…….each ($40.00) _____

TOTAL $ _____

MAKE CHECK PAYABLE TO:
ILLINOIS STATE FAIR

USE SEPARATE CHECKS FOR EACH ENTRY BLANK

NO REFUNDS

Receipt # _____

ID # _____ Exhibitor # _____

CLASS #	BREED & CLASS DESCRIPTION	TATTOO #

IMPORTANT NOTICE: This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under 20 ILCS 210/1-13. Failure to provide this information shall prevent this form from being processed. This form has been approved by the State Forms Management Center.in accordance with the Americans With Disabilities Act any attendee requiring a reasonable accommodation should notify us of their needs by August 1.