Carolina Swine Showmanship Circuit

2017 ENTRY FORM

Entry Deadline: August 31, 2017

Birthdate: / / Age on Jan. 1 st 2017:												
Exhibitor Nam	e:		I									
Mailing Addres	ss:											
City:	State:	Zip	Zip: County:									
Phone Number(s): PQA#:												
E-mail address	s:											
Parent or guar	dian na	me:										
T-Shirt Size: Y	outh or	Adult (p	olease c	ircle) YS	YM	YL	S	М	L	XL	XX	
All exhibitors have your Po	QA cert	ificate o	r card a	_	the la	st sho	w, o	r incl	ude			
Carolina	Swine S	howman	ship Circ	low all rules uit and the i m does not	ndivid	ual she	ows I	plan	to att	tend. I		
Exhibitor:					[)ate:_						
Parent/guardian:						_ Date:						
Please Retur Eileen Coite	n To:											

Sampson County Cooperative Extension 55 Agriculture Place Clinton, NC 28328 (910) 592-7161 (910) 592-9513 fax