

**2017 UPPER PENINSULA STATE FAIR-JUNIOR BEEF STEER SHOW AND SALE  
PRELIMINARY ENTRY FORM**

PLEASE MAIL OR FAX COMPLETED FORM(S) **ON OR BEFORE FEBRUARY 15, 2017** TO:

Upper Peninsula State Fair, 230 Ludington St. Escanaba, MI 49829 Fax: 906-786-8830 **Entries must be received/postmarked by February 15, 2017.** Late or incomplete entries **WILL NOT** be accepted.

Exhibitor's Name	Mailing Address & County	Contact info:	Exhibitor's Birth Date	Breed	First & Last Name of Breeder <u>COMPLETE ADDRESS WITH PHONE NUMBER</u>	Entry Date & Weight	Address Where Animal is Housed	Electronic ID Number	Fair Use Only
		Phone: ( ) _____ Cell: ( ) _____ e-mail:						_____	UPSF
		Phone: ( ) _____ Cell: ( ) _____ e-mail:						_____	DNA
		Phone: ( ) _____ Cell: ( ) _____ e-mail:						_____	UPSF
		Phone: ( ) _____ Cell: ( ) _____ e-mail:						_____	DNA
		Phone: ( ) _____ Cell: ( ) _____ e-mail:						_____	UPSF
		Phone: ( ) _____ Cell: ( ) _____ e-mail:						_____	DNA
		Phone: ( ) _____ Cell: ( ) _____ e-mail:						_____	UPSF
		Phone: ( ) _____ Cell: ( ) _____ e-mail:						_____	DNA

Please refer to other side for further registration information



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Please list only one entry per line. You may copy the form for additional entries.

**EXHIBITOR'S/FAMILIES MAY ENTER AN ALTERNATE STEER**

I hereby certify that:

1. The steers entered are being fed and handled as a productive enterprise project, and that individual project reports will be completed and delivered to the show with the animals.
2. The above entry weights were made by using a dependable scale or tape on the date indicated and were validated by a 4-H Leader/responsible party. If exhibitor is not a 4-H member, the entry weight must be verified by the responsible party (parent, guardian, or self if over 18 years of age). \*The Upper Peninsula State Fair reserves the right to refuse, accept conditionally, and to cancel any entries and awards of prizes without claims or damages.

\_\_\_\_\_  
Name of Organization (Club ,Chapter or Group)

\_\_\_\_\_  
Leader, Parent or County 4-H Program Coordinator

\_\_\_\_\_  
Name of Organization Leader

\_\_\_\_\_  
Telephone Number of Leader/Responsible party

\_\_\_\_\_  
Address of Club Leader\*

\_\_\_\_\_  
Date

\*Must be a complete address of person accepting responsibility for youth entry (club leader/parent)

**WILL YOU BE CAMPING DURING THE 2017 UPPER PENINSULA STATE FAIR    YES    NO**

Please refer to other side for further registration information

