

DATE: _____
PREMISE ID # _____

EX.# _____
ENTERED _____

**LIVESTOCK/ANIMAL
WINNEBAGO COUNTY FAIR ASSOCIATION OFFICIAL ENTRY BLANK**

**ENTRIES WILL CLOSE AT 4:00 P.M. SATURDAY, AUGUST 2, 2025
FEES MUST ALSO BE PAID BY 4:00 P.M. SATURDAY AUGUST 2, 2025
NO EXCEPTIONS!**

Website: www.winnebagoountyfair.com e-mail: fairinfo@winnebagoountyfair.com

Make Checks Payable to: WCFA **Mail Entries to:** WCFA **Fax Entries to:** 815-239-1653
PO Box 810 (If you fax an entry do
Pecatonica, IL 61063 not mail an entry form!)

NAME _____ **BIRTHDATE** _____
ADDRESS _____
CITY _____ **STATE** _____ **ZIP** _____
PHONE (____) _____ **Email** _____

****STATE OF ILLINOIS REQUIRES SOCIAL SECURITY NUMBER ON ALL ENTRIES****
****EACH EXHIBITOR MUST PAY ENTRY FEES AND PEN/STALL FEES REGARDLESS OF 4-H PARTICIPATION****
****EACH EXHIBITOR MUST PURCHASE AN EXHIBITOR PASS REGARDLESS OF 4-H PARTICIPATION. ****

____ Exhibitor Passes (\$10.00, limit 2) ____ Adult Season Passes (\$15.00)
____ Child's Season Pass (\$10.00) 9-12 years ____ Seniors 60 & Over Pass (\$10.00)
____ Stalls @ \$5.00 (beef, dairy) ____ Pens @ \$4.00 (goats, sheep, swine)

Estimated number of animals being shown in each department is required. Please complete the following to the best of your knowledge at this time:

Dept Letter ____ # of animals ____ Dept Letter ____ # of animals ____
Dept Letter ____ # of animals ____ Dept Letter ____ # of animals ____

DEPT. LETTER	SECTION #	CLASS #	DESCRIPTION (Wording in book)	ENTRY FEE
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Check here if additional entries on back

Each exhibitor must sign the Exhibitor Entry Statement on the back of this form.

Total Passes \$ _____
Total Stalls/Pens \$ _____
Total Entry Fees \$ _____
TOTAL DUE \$ _____
TOTAL PAID \$ _____

Office Use Only:
Cash _____ Check _____ Credit _____

Payment by Credit Card No: _____ **Exp:** _____ **3 Digit Code:** _____
(Back of Card)

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DEPT. LETTER	SECTION #	CLASS #	DESCRIPTION (Wording in book)	ENTRY FEE
9.				
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EXHIBITOR ENTRY STATEMENT

I have read and understand, and in consideration for being permitted to exhibit at the Winnebago County Fair, agree and consent to abide by the rules of competition, including the IAFE (International Association of Fairs and Expositions) National Code of Show Ring Ethics as stated in the premium list of this event.

Exhibitor (owner, exhibitor, fitter, trainer, or responsible person) DATE

Guardian or Parent (if under 18)

DATE