

DAIRY GOAT ENTRY FORM

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FRANKLIN COUNTY SHOW _____ OR ADGA SHOW _____

EXHIBITOR: _____ FARM: _____

ADDRESS: _____ CITY/STATE: _____ ZIP: _____

BREED: _____ HOUSING ALL WEEK _____ BARN GROUP ENTRY _____
 (PLEASE CHECK)

PHONE: _____

PLEASE PRINT (ONLY ONE BREED PER FORM PLEASE)

DATE: _____

SEC TION	CLASS	NAME/AGE OF ANIMALS	REG #	(R) TATTOO	(L) TATTOO	ENTRY FEE
TOTAL ENTRY FEE:						