2009 OPEN RABBIT ENTRY

Exh. No.

SEND ENTRIES TO : c/o Small Animal Dept., 1001 Beulah Ave., Pueblo, CO 81004

PLEASE PRINT **EXHIBITOR INFORMATION** ***PLEASE PRINT***

EXHIBITOR NAME_____**ADDRESS:**_____

CITY_____**STATE**_____**ZIP**_____ **COUNTY**_____

PHONE #(s)._____**CELL #** _____ **E-mail:**_____

EXHIBITORS SOC. SECURITY #_____**(REQUIRED-NUMBER MUST BE THE EXHIBITORS)W-9 MUST BE INCLUDED W/ENTRY)**

PREMISE IDENTIFICATION NUMBER _____

PASSES, PROCESSING, AND FEES

Exhibitor Processing Fee (MANDATORY)		$ 3.00
All Age 11-Day Pass	_____@ $25.00 Each	$_____
Adult Exhibitor (5-Day Punch Card)	_____@ $15.00 Each	$_____
South Lot Parking (5-Day Punch Card)—Limit 2 per exhibitor	_____@ $10.00 Each	$_____
TOTAL OF PASSES, PROCESSING, AND FEES		**$_____**

CLASS ENTRY FEES

Class Entry Fees for Rabbit in Premium Show	_____@ $ 3.00 Each	$_____
Class Entry Fees for Fur in Premium Show	_____@ $ 2.00 Each	$_____
Class Entry Fees for Meat Pen in Premium Show	_____@ $ 5.00 Each	$_____
Class Entry Fees for Rabbit in POINT Show	_____@ $ 3.00 Each	$_____
Class Entry Fees for Fur in POINT Show	_____@ $ 2.00 Each	$_____
Class Entry Fees for Meat Pen in Premium Show	_____@ $ 5.00 Each	$_____
TOTAL OF CLASS ENTRY FEES		**$_____**
(Add Passes/Fees & Class Fees) ==========GRAND TOTAL DUE		**$_____**

RABBIT ENTRY CLASS INFORMATION

Office Use	Division Number	Class Number	Ear Tattoo	Age & Sex of Rabbit, *i.e. Jr., Sr., Buck or Doe*	BREED	COLOR/VARIETY	Enter in Point Show Check (X)

Your entry is accepted subject to the following conditions: If any damage, loss, or injury to person or property shall be caused by reason of neglect or willful act of any person, firm, or corporation, or their agents, representatives, servants, or employees having license or privilege to exhibit, or occupy any space on the Colorado State Fair Grounds, Colorado State Fair, or its agents shall in no manner be responsible therefore, and in case it be subjected to any expense or liability, all persons causing same, or liable therefore, shall indemnify the Colorado State Fair. I hereby agree to abide by the Competition Requirements and regulations of the Colorado State Fair and by signing this waiver I accept the entries and credentials without any recourse to the Livestock office of the Colorado State Fair.

EXHIBITORS SIGNATURE _____ **DATE**_____

(Office Use Only): Clerk Initial _____ **Amount Paid**_____ **Check #**_____**Date Received**_____**BALANCE** _____

(Office Use Only): Clerk Initial_____**Amount Paid**_____**Check #**_____**Date Received**_____**BALANCE**_____

Acceptance of Credentials Upon Arrival: Signature_____**Date**_____

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Exhibitor Name

Office Use	**Division Number**	**Class Number**	**Ear Tattoo**	**Age & Sex of Rabbit, *i.e. Jr., Sr., Buck or Doe***	**BREED**	**COLOR/VARIETY**	**Enter in Point Show Check (X)**

PLEASE <u>COMPLETE</u> & ATTACH YOUR W-9

(Social Security Number of the Exhibitor)