



**“Wetlands, Water & Wildlife”
June 15 – 20**

**INDEPENDENT JUNIOR LIVESTOCK
EXHIBITOR**

Please refer to the Merced County Fair Exhibitor’s Handbook for local rules also available at www.MercedCountyFair.com

All rules contained in “State Rules for California Fairs” as established by the Division of Fairs and Expositions apply to the Merced County Fair, 35th District Agricultural Association. A copy may be obtained at the Fair Office in late March or from the Division of Fairs and Expositions (send a self addressed, stamped envelope to 1010 Hurley Way #200 Sacramento, CA 95825) or online at www.cdfa.ca.gov/fe

This is just an excerpt of State Rules that apply to junior livestock exhibitors:

VII., 17. Independent Exhibitors shall provide insurance coverage as required by the Fair.

VII, 20. Independent junior exhibitors entering market animals must provide Fair Management with a picture of their animal, appropriate proof of ownership, permanent tag, tattoo and/or hog ear notch information 120 days prior to the fair for beef and 60 days for sheep, swine and goats.

VII, 21. All junior exhibitors must have “on ground” supervision by a responsible adult.

VII, 26. Ownership...projects must be owned solely by and under the exhibitor’s care and management ...The official ownership date is the date shown on the receipt of sale unless the animal was bred by the exhibitor. The days are counted prior to the opening day of the fair. Market animals: Beef - 120 consecutive days; and 60 consecutive days for swine, sheep and goats. All small market animals (rabbits): 30 consecutive days.

Check List for Independent Junior Livestock Exhibitors

Due per ownership rules above:

Picture of Animal
Proof of Ownership

Due on or before May 13, 2010

Insurance Payment:
 Small Animal \$18 (unlimited entries)
 Large Animal \$35 (unlimited entries)
Copy of Birth Certificate or Drivers License
Entry Form and Entry Fees
Signed Junior Livestock Exhibitor Affidavit

**INDEPENDENT JUNIOR LIVESTOCK EXHIBITOR
PROOF OF OWNERSHIP**

Name of Exhibitor _____

Address _____

City _____ Zip _____ Phone _____

PROJECT INFORMATION

Name of Animal _____

Species of Animal _____

Breed of Animal _____

Date Animal Purchased _____

Birth Date of Animal _____ Sex of Animal _____

Breeder _____

Where Animal was Purchased (if different from breeder) _____

Cost of Animal _____ Weight of Animal at Purchase _____

Please attach a copy of your bill of sale or receipt for the purchase of your animal.

Animal Identification (ear notch, permanent tag number, tattoo number) _____

Please attach a photograph of the project animal with i.d. tag, etc., as best as possible. This form, copy of bill of sale and the photo are due at the Fair Office by the following dates:

Beef and Dairy	(120 days prior to fair)	February 14, 2010
Market Beef to turn this form in at the MANDATORY Pre-weigh on Thursday, February 18, 2010		
Swine, Sheep and Goats	(60 days prior to fair)	April 16, 2010
Rabbits and Avian	(30 days prior to fair)	May 16, 2010

You will not be able to show your animal at the fair if you do not meet these deadlines.

Exhibitor Signature

Parent/Guardian Signature

INDEPENDENT JUNIOR LIVESTOCK EXHIBITOR AFFIDAVIT

Name of Exhibitor _____

The undersigned declares that his/her livestock entry(ies) has been under his/her ownership, care and management for the appropriate amount of time according to State Rules (120 days prior to fair for beef; 60 days prior to fair for sheep, swine and goats; 30 days prior to fair for rabbits and avian).

If an independent exhibitor, the undersigned declares that he/she has not been a member of a junior division organization for this project/specie within 60 days (120 days for market beef) prior to the fair.

The undersigned declares that he/she has read and understands all Local rules (printed in the Merced County Fair Exhibitor's Handbook) and State Rules pertaining to his/her junior livestock project.

Signed _____ (Exhibitor)

_____ (Parent/Guardian)

For Office Use Only

- () Picture
- () Proof of Ownership
- () Copy of Birth Certificate or Drivers license
- () Insurance Payment – Amount _____ Date _____ Receipt # _____