SWINE ENTRIES MUST BE RECEIVED BY 4:30 P.M., JULY 18, 2016. PLEASE TYPE OR PRINT.

SWINE DEPARTMENT

IMPORTANT: USE SEPARATE ENTRY BLANKS FOR DIFFERENT OWNERS.

OFFICE USE ONLY
Exh. #_____
Fee **$10.00**_____
Animal Fee:_____
Paid _____
Check Cash Money Order
Ck #_____

Exhibitor Name_____
Farm Name _____
Post Office Address _____
City _____ State_____Zip Code_____
County_____ Phone No._____ _
Name premium is to be paid to:_____
Payee's Soc. Sec. No. or Federal ID No. _____
The New York State Office of the State Comptroller requires state agencies to document Payee ID (social security number or federal ID number) prior to issuing payment. Failure to provide the New York State Fair with your social security number or federal identification number will result in the forfeiture of all prize money.

Arrival: Expected date and time_____

PLEASE CHECK:

FEES MUST BE SENT WITH THIS FORM
EXHIBITOR'S FEE.....$10.00
SWINE (PER HEAD).....$3.00
TOTAL NUMBER OF ENTRIES_____
TOTAL NUMBER OF PENS _____
DO NOT INCLUDE TACK PENS, TACK PENS WILL BE ALLOCATED BY THE SUPERINTENDENT.
TOTAL FEE _____

DIVISION/ BREED	CLASS NO.	ANIMAL DATE OF BIRTH	REGISTRATION NO.	EAR TAG NO./ EAR NOTCH NO.
		MAKE SURE YOU REVIEW THE NEW ARRIVAL SCHEDULE IN THE CENTER OF THE BOOK.		

Exh. Info _____
Entry Info _____
Fee Info_____
Date Complete_____