



Equal Opportunity Programs

THE MARYLAND STATE FAIR AND AGRICULTURAL SOCIETY, INC.
P.O. Box 188, Timonium, MD 21094-0188
DO NOT MAIL TO THE MD STATE FAIR. Send to your extension educator for signature!
2007-4-H/FFA EXHIBITOR RELEASE FORM

DEADLINE: December 1, 2006 to Howard County 4-H Office

PRIVACY DISCLOSURE: Information provided on State Fair Entry Forms may be used and shared within the Maryland State Fair and Agricultural Society, Inc. (MSF), Maryland Cooperative Extension (MCE), the University of Maryland and the University System of Maryland and with outside entities as necessary or appropriate in accordance with applicable law and the mission, purpose and functions of MSF, MCE and the University.

It is the policy of the Maryland Cooperative Extension that that no person shall be subjected to discrimination on the grounds of race, color, gender, religion, national origin, sexual preference, age, marital or parental status, or disability.

ATTENTION EXHIBITOR: This form must be completed in order to exhibit at the Maryland State Fair.

Please read the following sections carefully, then complete and sign where indicated. Both sections I and II must be completed regardless of the age of the Exhibitor.

SECTION I - EXHIBITOR

I, the undersigned Exhibitor, have read, understand and agree to abide by all the Rules and Regulations published in the MSF 4-H and FFA Premium Catalog. I also have read, understand and agree to abide by the rules and guidelines presented in "Maryland 4-H Behavioral Expectations" and "Maryland 4-H Disciplinary Policy and Procedures".

I hereby certify that I am participating as an active member of (check one):

4-H 4-H Age: BirthDate: 4-H County/City: HOWARD

Printed LAST NAME of Exhibitor

Printed FIRST NAME

Signature

SECTION II - PARENT/LEGAL GUARDIAN

I, the undersigned Parent or Legal Guardian of the above named Exhibitor, hereby release and shall indemnify and hold harmless the University of Maryland, Maryland Cooperative Extension and the Maryland State Fair and Agricultural Society, Inc. and their agents, employees and volunteers for any accident or injury or loss to person or property which may occur while my child is participating in the Maryland State Fair.

Printed Name of Parent/Legal Guardian

Signature

Date

Completed form is due by December 1, 2006 to the 4-H office. Only ONE Release Form per exhibitor is required.

FAXED FORMS WILL NOT BE ACCEPTED.

Questions regarding this form may be directed to the 4-H Office at (410) 313-1915.

I acknowledge that I have read, understand and agree to abide by the rules, regulations, policies and procedures published in the Maryland State Fair 4-H/FFA Premium Catalog. I understand that I will have to sign and turn in an Exhibitor Release Form in order for my child to exhibit at the fair.

I acknowledge that I have read, understand and agree to abide by the rules, regulations, policies and procedures published in the Maryland State Fair 4-H/ FFA Premium Catalog. I understand that my parent/guardian and I will have to sign and turn in an Exhibitor Release Form in order for me to exhibit at the fair.

I verify this Exhibitor is a 4-H or FFA Member currently enrolled in good standing with a signed "MD 4H Code of Show Ring Ethics" on file and if applicable, has completed a Quality Assurance Training within the last 3 years, making them eligible to exhibit at the State Fair in this division.

HORSE EXHIBITORS ONLY: Along with the above, named exhibitor has passed PL 1 & 2, and has a valid H& P card on file for the animal(s) named on the entry form.

Signature of Parent/Guardian
Date

Signature of Exhibitor
Date

Sheryl L. Burdette January 2007
4-H Ext. Educator/FFA Advisor
Date

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