

## ST. MARY'S COUNTY FAIR

## September 19-22, 2024

## ST. MARY'S COUNTY FAIRGROUNDS

All entries are due NO LATER than August 31, 2024

Send Entries to: St. Mary's County 4-H Office, P.O. Box 663, Leonardtown, MD 20650

or email bdobbins@umd.edu

## MEAT GOAT ENTRIES

| NAME:                      |                 |   | AGE (as of 1/1): |                                  |         | PHONE:                    |                            |                         |                                     |
|----------------------------|-----------------|---|------------------|----------------------------------|---------|---------------------------|----------------------------|-------------------------|-------------------------------------|
| ADDRES                     | SS:             |   | CLUB NAME:       |                                  |         |                           |                            |                         |                                     |
| Section                    | Class<br>Number | Class Name  | Breed            | Date of Birth                    | Sex     | Personal Tag<br>or tattoo | State<br>4-H Tag<br>Number | Premise/RFID Tag Number | Registration Number (if applicable) |
|                            |                 |   |                  |                                  |         |                           |                            |                         |                                     |
|                            |                 |   |                  |                                  |         |                           |                            |                         |                                     |
|                            |                 |   |                  |                                  |         |                           |                            |                         |                                     |
|                            |                 |   |                  |                                  |         |                           |                            |                         |                                     |
|                            |                 |   |                  |                                  |         |                           |                            |                         |                                     |
|                            |                 |   |                  |                                  |         |                           |                            |                         |                                     |
|                            |                 |   |                  |                                  |         |                           |                            |                         |                                     |
|                            |                 |   |                  |                                  |         | Requested Num             | ber of Stalls:_            |                         |                                     |
| SIGNATURE OF PARTICIPANT:  |                 |   |                  |                                  | DATE:   |                           |                            |                         |                                     |
| PARENT/GUARDIAN SIGNATURE: |                 |   |                  |                                  | _ DATE: |                           |                            |                         |                                     |
|                            |                 | off, I certify that the above named 4-H nduct, the record book requirements h |                  |                                  | nas com |                           |                            |                         |                                     |
|                            | 4-H E           | Educator/Staff Signature  | <u> </u>         | UNIVERSITY OF MARYLAND EXTENSION |         |                           |                            |                         |                                     |

This institution is an equal opportunity provider.

rev. 7/2024