**COOKE COUNTY YOUTH FAIR**

**ENTRY DEADLINE TO 4-H OFFICE DECEMBER 5, 2016**

**4-H Entry Form**

**Family & Consumer Science Entry Form**

**NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CLUB:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMAIL:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ S**CHOOL:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Divisions: ART / CLOTHING / CREATIVE ARTS / FOODS / PHOTOGRAPHY**

**\*ONE ENTRY PER CLASS #** \* \* **MAXIMUM OF 8 TOTAL ENTRIES \***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|   | **Division** | **Class #** | **Class Description / Item Description** | **$5.00 each** |
| 1 |   |   |   |   |
| 2 |   |   |   |   |
| 3 |   |   |   |   |
| 4 |   |   |   |   |
| 5 |   |   |   |   |
| 6 |   |   |   |   |
| 7 |  |  |  |  |
| 8 |   |   |   |   |
|  |   |   | **TOTAL $ DUE** |   |

**Eligibility Requirements**

***\*\*\*REQUIREMENTS WILL BE STRICTLY ENFORCED\*\*\****

\*The NO PASS/NO PLAY rule will be in effect. No exhibitor will be able to show or sell if he/she fails in a subject during the 3 weeks grading period PRIOR to the show and sale.

\*ALL Exhibitors will comply with the Drug Awareness Program

\*Exhibitors grant COOKE COUNTY UNITED WAY the right to publish, display, copyright and distribute photos of them at any time and for the purpose of relating to the promotion of the Cooke County United Way and its programs or events. Exhibitor waives all claims for any compensation or damages for such use.

\***ALL 4-H’ers must be a member of a chartered Cooke County 4-H club by November 1, 2015 with a current enrollment form on file AND have attended at least 3 club meetings between August 16 and day of CCYF FCS Contest. NO meetings can be made up.**

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Signature of Exhibitor Signature of 4-H County Agent

***OFFICE USE ONLY***

Date Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check#: \_\_\_\_\_\_\_\_\_\_\_\_ Cash \_\_\_\_

Receipt#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number