



**ELIGIBILITY FORM**

**Section 1**

**Please complete this form in the order of the sections**

This is to certify that \_\_\_\_\_ is a member of the \_\_\_\_\_, (4-H Club or FFA Chapter) and he/she will be showing in the following projects at the Waller County Fair. I am requesting a determine of eligibility for the above exhibitor to participate in the Waller County Fair.

Signature of Parent/Guardian: \_\_\_\_\_

<b>X</b>	<b>Project</b>	<b>Date(s)</b>	<b>X</b>	<b>Project</b>	<b>Date(s)</b>	<b>X</b>	<b>Project</b>	<b>Date(s)</b>
	Calf Scramble			Rabbits			Creative Living	
	Market Steers			Turkeys			Queen Contest	
	Calf Scramble Heifer			Swine			Market Goat	
	Livestock Judging			Horse			Market Lambs	
	Breeding Heifers			Broilers			Breeding Does	

*X- Please mark all the Projects that apply with dates*

**Section 2**

I verify that the above-named exhibitor is a member of Waller County 4-H:

Extension Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OR**

I verify that the above-named exhibitor is a member of FFA:

FFA Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Section 3**

I verify that the above-named exhibitor \_\_\_\_\_ is, \_\_\_\_\_ is NOT, academically eligible to participate in the above-mentioned activities at the Waller County Fair.

School District: \_\_\_\_\_

School/Campus: \_\_\_\_\_

Principal Signature: \_\_\_\_\_ Date: \_\_\_\_\_