

**\*\*ENTRY DEADLINE IS JUNE 1, 2017\*\***

**POULTRY ENTRY FORM**

**ENTRY DEADLINE – RETURN TO THE EXTENSION OFFICE BY JUNE 1**

**NAME** \_\_\_\_\_ **BIRTH DATE** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**4-H CLUB** \_\_\_\_\_

**PHONE #** \_\_\_\_\_ **EMAIL** \_\_\_\_\_ **CELL #** \_\_\_\_\_

<b>SECTION/ DIVISION</b>	<b>CLASS</b>	<b>CLASS DESCRIPTION AND/OR BREED</b>	<b>SEX</b>	<b>BAND #</b>

*(Please complete the Veterinary Client Patient Relationship on the reverse side of this form →.)*

- CLASS NO.**      **CLASS/CLASSES**
- Class 00**      **Embryology** – Exhibit poster or display in Exhibit Building describing the different stages of embryotic development
- Class 01**      **Companion Poultry** - \*new\* Explain a special pet quality or trick your bird has, this class is not judged on physical breed characteristics, just on you and your bird
- Class 02**      **Egg producers** – Bird & 1 dozen eggs
- Class 03**      **Meat Production** – 3 Broilers
- Class 04**      **Exhibition Poultry**
- Class 05**      **Backyard Poultry** – may be mixed breeds
- Class 06**      **Egg Show** – 1 Dozen Eggs
- Class 07**      **Embryology Project** –any fowl
- Class 08**      **Poster/display**

## **Animal Owner or Caretaker's Verification of Veterinarian Consultation Relationship**

The following Animal Owner or Caretaker's Verification of Veterinarian-Client-Patient Relationship (VCPR) statement is required to be signed by all exhibitors entering animals to be exhibited.

**"I attest and affirm that a veterinary consultation relationship – as that phrase is defined in the Animal Exhibition Sanitation Law found at 3 Pa.C.S.A. § 2501 et seq. and any amendments thereto – exists with regard to any animals I will be exhibiting."**

\_\_\_\_\_  
Printed name of Owner/Caretaker                      Signature of Owner/Caretaker                      Date

If the owner/caretaker is under 18 years of age, the signature of a parent or guardian is required.

\_\_\_\_\_  
Printed name of Parent or Guardian                      Signature of Parent or Guardian                      Date