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\$10.00 per person registration fee required.

West End Fair Association

Mail to:
West End Fair Association
PO Box 115
Gilbert, PA 18331

DIVISION LIVESTOCK BEEF CATTLE — DEPARTMENT 3 Entries close July 23

Exhibitor's Name Mailing Address	
Phone No	I hereby state I am a resident of Monroe County.
☐ Please check box if you are a new exhibitor. ☐ Please check box if your address or phone number has ch	Exhibitor's Signature nanged.
Number of stalls required I attest and affirm that a "veterinary consultation relationship Exhibition Sanitation Law found at 3 Pa.C.S.A. § 2501 et seq. any animals I will be exhibiting.	
	Signature
IMPORTANT: Please read General Ru	iles and Regulation for Livestock.

BIRTH DATE/AGE	DA	NAME OF ANIMAL	C LASS NUMBER	BREED	BREED NUMBER	SECTION NUMBER
M/DD/YY)	(MM	Mickey	06	Crossbreed	7	Example 1