



2026 Fort Bend County Fair Replacement Heifer Show

Sale Information Form

(This form is to be turned in at Check-In for the Fair in September)

Circle one: Halter or Pen of Two

Exhibitor Name: _____

Breeder Name: _____

Breed of Cattle: _____

Date of Birth: _____

Class #: _____

Halter/Tag #: _____

Pen/Tag #: _____

Pregnancy Status: _____

Breed of Bull/A.I.: _____

Heifer A – Months/Days Bred: _____

Heifer B – Months/Days Bred: _____

Heifer C – Months/Days Bred: _____

Exhibitor Name: _____

Tag ID: _____

2026



**FORT BEND COUNTY FAIR
REPLACEMENT HEIFER**

VETERINARIAN'S STATEMENT

Veterinarian Statement is to be turned in at the time of **Check-In for verification**

**I CERTIFY THAT THE HEIFER(S)
(PEN OF TWO AND/OR HALTER CLASS)
ARE SAFE IN CALF**

Exhibitor: _____ Club: _____

Ear Tag

Months Bred

A: _____

B: _____

C: _____

Veterinarian Signature

Date

Veterinarian (Print)