| 2 | | | | Deadline: June 15th | | | □ Gosper | | | |
|--|----------------|-------------------------|---|---------------------|---|---|-------------------------|-------|-------|-----------|
| Last Name Last Name Last Name Parent Signature Date | | | | | First Name | (4-H Age) | 4-H Club or FFA Chapter | | | _ |
| | | | | | First Name (4-H Age) First Name (4-H Age) | 4-H Club or FFA Chapter | | | _ | |
| | | | | | | (4-H Age) | 4-H Club or FFA Chapter | | | |
| | | | | Address | | Contact Number | | | _ | |
| Extension S | taff Signatu | ire | | | Premise ID# <i>REQUIRI</i> (call 402-471-2351 to | YQCA# REQUIRED BY JUNE 15 (please turn certificate in to office) | | | | |
| | | | | | | | Tag Locati | | | |
| Exhibitor Initials (if known) | County Fair | State Fair/ AKSARBEN | Breed or Breeds Involved/Description | Sex | S | crapie TAG # | Left | Right | Notes | FFA (c |
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