	TS IOVE	MBE Indian R		outh	EACH Form	
Name 4H / FFA Club Name Address City, St, Zip Code Phone # Email				IR Mail Ent	Make Checks Payable to: IRCYL&H Inc. Mail Entry Forms & Checks to: IRCYL&H Inc. c/o Suzy Wilson	
AGE		hy			50 91st Street mere, FL 32948	
One Entry Form per Exh Form must be received by To be considered early Name of Animal	Oct. 31st	After O		per Head & \$1	howmanship 5 for Showmanship STEER / BULL/ HEIFER	

Indian River Co. nor IRCYLH Inc. will not be responsible for any accidents or injuries that may occur.

Exhibitor and Parent / Legal Guardian agrees to hold and indemnify Indian River Co & IRCYLH Inc. harmless from any and all liability arising out of exhibitors use of the grounds, including all injury or damage to exhibitor or animal or participants and the public. Indian River Co. & IRCYLH Inc. will be responsible for any lost personal items such as grooming equipment, water hoses, feed tubs, etc.



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EXIBITOR SIGNATURE

PARENT / LEGAL GUARDIAN SIGNATURE