

# Entry Form

**Deadline for all entries is March 6, 2020**

Turn in or mail all entries to:

Texas A&M AgriLife Extension Service, P.O. Box 191, Groesbeck, TX 76642  
Located on the ground floor of the Limestone County Courthouse, 200 W. State Street

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Member of (check one):  4-H  FFA  FCCLA Club: \_\_\_\_\_

Entry fees: \$10.00 each for classes 1-15, and \$5.00 each for classes 16-34.

Family membership: \$10.00 (if not already paid)

## Make checks payable to LCFA

Class Entered:

(If entry is a food item, submit the recipe on an index card with entry form.)

_____ Class 1	_____ Class 10	_____ Class 19	_____ Class 28
_____ Class 2	_____ Class 11	_____ Class 20	_____ Class 29
_____ Class 3	_____ Class 12	_____ Class 21	_____ Class 30
_____ Class 4	_____ Class 13	_____ Class 22	_____ Class 31
_____ Class 5	_____ Class 14	_____ Class 23	_____ Class 32
_____ Class 6	_____ Class 15	_____ Class 24	_____ Class 33
_____ Class 7	_____ Class 16	_____ Class 25	_____ Class 34
_____ Class 8	_____ Class 17	_____ Class 26	
_____ Class 9	_____ Class 18	_____ Class 27	

**I DO NOT WANT MY FCH ENTRY INCLUDED IN THE SILENT AUCTION:**

By signing this Entry Form & as a condition of entry in the FCS Division of the Limestone County Fair, I certify that I have read, understand & will abide by the rules & regulations in the 2018 Limestone County Fair and Youth Livestock Show & Rodeo Rule Book & as promulgated by the FCS Division. I acknowledge that all of the above-stated information & representations are true & correct. Limestone County Fair FCS Division and the LCFA reserves the right to publish images of me and/or my entries taken during the contest events and use such images in its business, promotion & advertising without any compensation due to me. By signing below, I voluntarily agree to these terms.

Signature of Exhibitor \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Parent's Home Telephone: \_\_\_\_\_

Parents Work or Cell number: \_\_\_\_\_

Entry fees will not be refunded or transferred, but categories may be changed after entry form is submitted. Form must be complete. Payment of entry fees must be included. Make payment to LCFA. \*\*\*This form may be duplicated.\*\*\*