

Meigs County Market Livestock Project
COMMERCIAL BEEF FEEDER

Exhibitor Name _____

Address _____ Date of Birth _____

Name of Parent/Guardian _____ Phone _____

Name of 4-H or FFA Club _____

This information must be provided per Ohio Department of Agriculture Requirement

Feeder #1

Tag # _____ Breed _____ Color _____ Born _____
From who was the feeder purchased? _____
Seller's Address _____ Seller's Phone # _____

County/State where feeder was born _____ Meigs County Township _____
_____ This feeder is Meigs County Born and all information provided is accurate that
applies to the Meigs County Born rules. (check if applicable)

Feeder #2

Tag # _____ Breed _____ Color _____ Born _____
From who was the feeder purchased? _____
Seller's Address _____ Seller's Phone # _____

County/State where feeder was born _____ Meigs County Township _____
_____ This feeder is Meigs County Born and all information provided is accurate that
applies to the Meigs County Born rules. (check if applicable)

*All of the above information must be completed, signed by the exhibitor and parent/guardian and submitted by registration deadline. Exhibitor is responsible for submitting this form by the deadline. I hereby certify that the above information is correct and agree to abide by the Meigs County Fair rules and regulations that comply with them to the best of my ability. Providing false information may result in disqualification from the current and future fairs.

Member/Exhibitor Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

*Please indicate address and directions to the location where beef feeder is housed on this sheet.