

CIRCLE SPECIES SHOWN:

DAIRY CATTLE

BEEF

SHEEP

SWINE

DAIRY GOATS

GOATS

FIRST AID PARENT PERMISSION FORM

Each youth exhibitor is required to have the following form completed and signed by a parent/guardian and returned to the Livestock Office.

JUNIOR LIVESTOCK

EXHIBITOR NAME _____ AGE _____

CHAPTER/CLUB _____

The above-named exhibitor has my permission to seek first aid treatment at the Fresno Fairgrounds First Aid Station during his/her stay.

In my absence, it is understood that our group leader, _____, will be notified of any injury and will be promptly advised of what further medical treatment, if any, may be required.

Parent/Guardian Signature Date _____

Parent's Name PRINTED Phone () _____

My child has had a **Tetanus Toxoid Booster** on: Month _____/Year _____

_____ My child has **NO KNOWN ALLERGIES** to medication.

_____ My child **IS ALLERGIC** to the following medication(s): _____

Other health problems to be aware of: _____

**LIVESTOCK
PHOTO RELEASE FORM**

Name: _____ **Club/Chapter:** _____

Photo Number: _____

Photo Description: _____

ADULT:

I hereby give permission to The Big Fresno Fair to use my photograph taken by The Big Fresno Fair photographer in future Big Fresno Fair publicity advertisements or other publicity use.

Print Name

Signature

Date: _____

CHILDREN 18 AND UNDER:

I, _____, parent/guardian of _____, give permission to The Big Fresno Fair to use the photographs taken of my child by The Big Fresno Fair photographer in future Big Fresno Fair publicity advertisements or other publicity use.

Child's Name (Print)

Parent's Name (Print)

Parent/Guardian Signature

Date: _____

REPLACEMENT DAIRY/PROSPECT HEIFER CONTRACT

**ALL CONTRACT INFORMATION MUST BE COMPLETED
OR THE CONTRACT WILL NOT BE ACCEPTED!**

1. PHOTOGRAPHS OF BOTH SIDES OF ANIMAL WITH EXHIBITOR CLEARLY IN THE PICTURE MUST ACCOMPANY THIS CONTRACT. ***PHOTOS MUST BE IN COLOR AND ON WHITE PAPER IF COMPUTER GENERATED. NO BLACK AND WHITE PICTURES. ALL ANIMALS MUST BE FREE OF MUD OR OTHER MATERIAL THAT MAY AFFECT PROPER IDENTIFICATION OF THE ANIMAL.***
2. CONTRACTS ARE DUE AT INSPECTION AND MUST BE ACCOMPANIED BY :BILL OF SALE, BRAND INSPECTION, TRANSPORTATION PAPERS, AND/OR STATEMENT OF BRED AND OWNED (WHERE APPROPRIATE) MUST ACCOMPANY THIS CONTRACT. **CONTRACT DUE DATE MAY 14, 2016**
3. ***REMEMBER, ALL DAIRY/PROSPECT REPLACEMENT HEIFERS MUST BE INSPECTED.*** PLEASE COMPLETE THE RESERVATION FORM FOR YOUR INSPECTION DATE.
4. ***IF THE ANIMAL IS PURCHASED OUT OF THE STATE OF CALIFORNIA, A CERTIFICATE OF VETERINARY INSPECTION MUST BE INCLUDED.***
5. ALL FORMS MUST BE FILLED OUT IN BLUE OR BLACK INK. NO COLORED INK OR PENCIL.
6. REMINDER: ALL ENTRIES, FIRST AID, AND PHOTO RELEASES ARE DUE: **MAY 6, 2016.**

IF THE ABOVE ITEMS ARE NOT COMPLETED AND BROUGHT OR MAILED TO THE LIVESTOCK OFFICE BY MAY 14, 2016, YOUR HEIFER WILL NOT BE IN THE REPLACEMENT DAIRY/PROSPECT HEIFER PROGRAM.

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PROSPECT & DAIRY REPLACEMENT HEIFER CONTRACT – THE BIG FRESNO FAIR 2016

This contract is to be COMPLETED and turned into the Livestock Office for any Prospect or Dairy Replacement Heifer project on or before May 14, 2016. *Please use BLUE or BLACK ink only.*

Name of Exhibitor: _____
Club/Chapter: _____ Leader/Advisor: _____
Exhibitor's Mailing Address: _____
City: _____ Zip: _____ Phone: (____) _____

Please Check One: Prospect Replacement Heifer Dairy Replacement Heifer
Name/ID Number of Heifer: _____
Breeder of Heifer: _____
 (Owner of the dam of your heifer at the time your heifer was conceived.)
Birth Date of Heifer: _____ Breed of Animal: _____
Replacement Heifer must fall between: *08/01/14-12/31/14; Prospect between: 08/01/15-12/31/15
Dam of Heifer: _____ Sire of Heifer: _____
Brucellosis Tag Number: _____ Brand and Location of Brand: _____
Service Sire: Name/Stud Code: _____
 AI? _____ or Pasture? _____
Projected Date of Calving: _____

POINT OF ORIGIN INFORMATION: (Please list the following information for the ranch/individual from whom you purchased your animal. If "bred by exhibitor," please state.)
Ranch/Individual Name: _____
Address: _____
City: _____ State: _____ Zip: _____

A photograph of heifer's right side and left side with exhibitor clearly in picture is to accompany the contract. PRODUCTION RECORDS of your heifer's dam must be attached to this contract. Handwritten records will not be accepted.

I HAVE REVIEWED THE RULES ACCOMPANYING THIS CONTRACT AND BY SIGNING THIS CONTRACT, I AGREE TO ABIDE BY RULES PERTAINING TO MY PROJECT. AN UNACCEPTED CONTRACT RENDERS AN ANIMAL INELIGIBLE FOR ANY COMPETITION.

Exhibitor: _____ Date: _____
Parent/Guardian: _____ Date: _____
Leader/Instructor: _____ Date: _____

DAIRY REPLACEMENT HEIFER
INSPECTION RESERVATION FORM

Please complete this form and email: livestock@fresnofair.com or Fax (559)453-9809 to the livestock office by May 6, 2016.

I will bring my Heifer to Caruthers Fairgrounds:

Saturday – May 14, 2016, between the hours of 7 a.m. and 10 a.m.

#Head _____ Time _____

Please list the date and time in the appropriate area and return this form with your contract.

Name of exhibitor: _____

Contact telephone number for inspection day: _____

Club/Chapter/Independent: _____

Leader/Advisor: _____ Phone: _____

Inspection for Dairy Replacement Heifers only.

**REPLACEMENT DAIRY DOE GOAT CONTRACT
THIS IS NOT AN ENTRY**

ENTRIES MUST BE MADE ON-LINE: WWW.FRESNOFAIR.COM

DUE DATE: SATURDAY, JULY 9, 2016

CONTRACT MUST BE COMPLETELY FILLED OUT TO BE ACCEPTED. UNACCEPTED CONTRACTS WILL RENDER AN ANIMAL INELIGIBLE TO SELL.

NAME OF EXHIBITOR: _____

MAILING ADDRESS: _____

CITY: _____ **ZIP:** _____ **PHONE:** _____

E-MAIL: _____

CLUB/CHAPTER: _____

LEADER/ADVISOR: _____ **PHONE:** _____

NAME OF DOE: _____ **BIRTH DATE:** _____
(Birth date must fall between 12-01-14 and 3-01-16)

REGISTRATION NUMBER: _____ **TATTOO: RE/RT** _____ **LE/LT:** _____

DAM NAME: _____ **REG. #:** _____

SIRE NAME: _____ **REG. #:** _____

BREEDER OF DOE: _____
(Owner of dam at time your doe was conceived.)

POINT OF ORIGIN: _____
(Please state name and address of ranch/individual from whom you purchased the doe.
If "bred by exhibitor," please state so.)

IF DOE IS BRED OR EXPOSED, SIRE DOE IS BRED TO: _____
(Name and registration number, you will need to provide a service memo at the fair check in.)

PROJECTED KIDDING DATE: _____
(Recommended to breed yearling Does, leaving younger Does ready to breed at time of sale.)

A color photograph of the Doe's right side and left side with the exhibitor clearly in the picture is to accompany this contract or can be printed on back side of this contract.

I HAVE REVIEWED THE RULES ACCOMPANYING THIS CONTRACT AND BY SIGNING THIS CONTRACT, I AGREE TO ABIDE BY RULES PERTAINING TO IT.

EXHIBITOR: _____ **DATE:** _____

PARENT/GUARDIAN: _____ **DATE:** _____

LEADER/ADVISOR: _____ **DATE:** _____

DAIRY REPLACEMENT DOE

INSPECTION RESERVATION FORM

Please complete this form to reserve your inspection time for your Dairy Goat Replacement Doe. Remember, this inspection is mandatory and will be done at The Big Fresno Fairgrounds. There will be no other inspections offered and if your Doe is not inspected, it will be eliminated from the replacement doe program. Also at this time we will be collecting for mandatory CAE test. Contracts and photos are due at this time.

Entries for Replacement Does are due Saturday, July 9, 2016

Times for appointments: 8 A.M. – 10 A.M., Saturday, July 9, 2016

Please list the time and return or Fax this form **NO LATER THAN JULY 1, 2016.**
The Livestock Fax # is (559) 453-9809 or email: livestock@fresnofair.com

Name of exhibitor: _____

Contact telephone number for inspection day: _____

Club or Chapter: _____

Leader/Advisor: _____ Phone: _____

Inspection for Dairy Replacement Does only.

MARKET BEEF
RESERVATION FORM

**Please complete this form to reserve your weighing time for your market beef.
Remember, this weighing will be done at The Big Fresno Fairgrounds between 8 am and
12 Noon on the date listed below. Reservation forms are due Friday, June 10, 2016.
Entries for market beef are due Wednesday, June 1, 2016.**

I will bring my Market Beef to The Big Fresno Fair at the requested time:

Saturday, June 18, 2016 - # Head _____ Time _____

Please list the date and time in the appropriate area.

Name of exhibitor: _____

Club/Chapter/Independent: _____

Leader/Advisor: _____ Phone: _____

Contact telephone number for inspection day: _____

Rate of Gain Weighing of Market Beef only.

Please mail this form to: The Big Fresno Fair
Livestock Department
1121 S. Chance Avenue
Fresno, CA 93702-3707

Or FAX this form to: Livestock Department
FAX#: (559) 453-9809
Email: livestock@fresnofair.com

**MARKET ANIMAL
RESERVATION FORM**

Please complete this form to reserve your weighing time for your market lambs, goats and hogs. Remember, this weighing will be done at The Big Fresno Fairgrounds between 8 am and 12 Noon on the dates listed below. Reservation forms are due Friday, July 22, 2016. Entries for market lambs, goats and hogs are due on Sunday, July 31, 2016.

I will bring my market animal to The Big Fresno Fair at the requested time.

4-H/Independent market animals:

Saturday, July 30, 2016 Specie _____ # Head _____ Time _____

FFA/Independent market animals:

Sunday, July 31, 2016 Specie _____ # Head _____ Time _____

Please list the date and time in the appropriate area.

Name of exhibitor: _____

Club/Chapter/Independent: _____

Leader/Advisor: _____ Phone: _____

Contact telephone number for inspection day: _____

Rate of Gain Weighing of market lamb, goats and hogs.

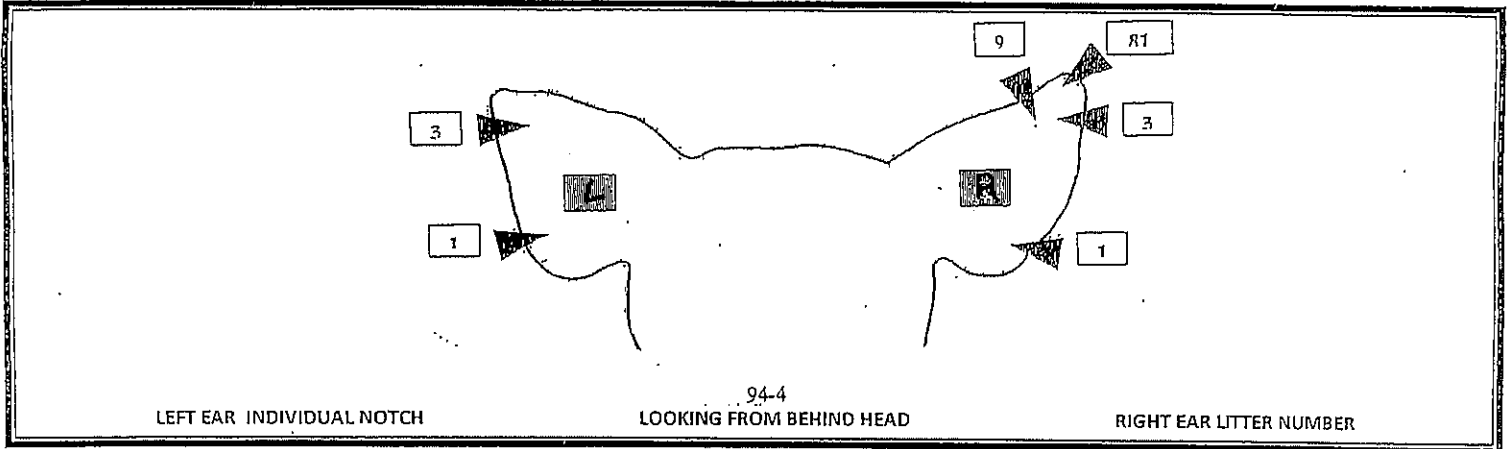
Please mail this form to: The Big Fresno Fair
Livestock Department
1121 S. Chance Avenue
Fresno, CA 93702-3707

Or FAX this form to: Livestock Department
FAX#: (559) 453-9809

EXHIBITOR: _____ CLUB/CHAPTER: _____

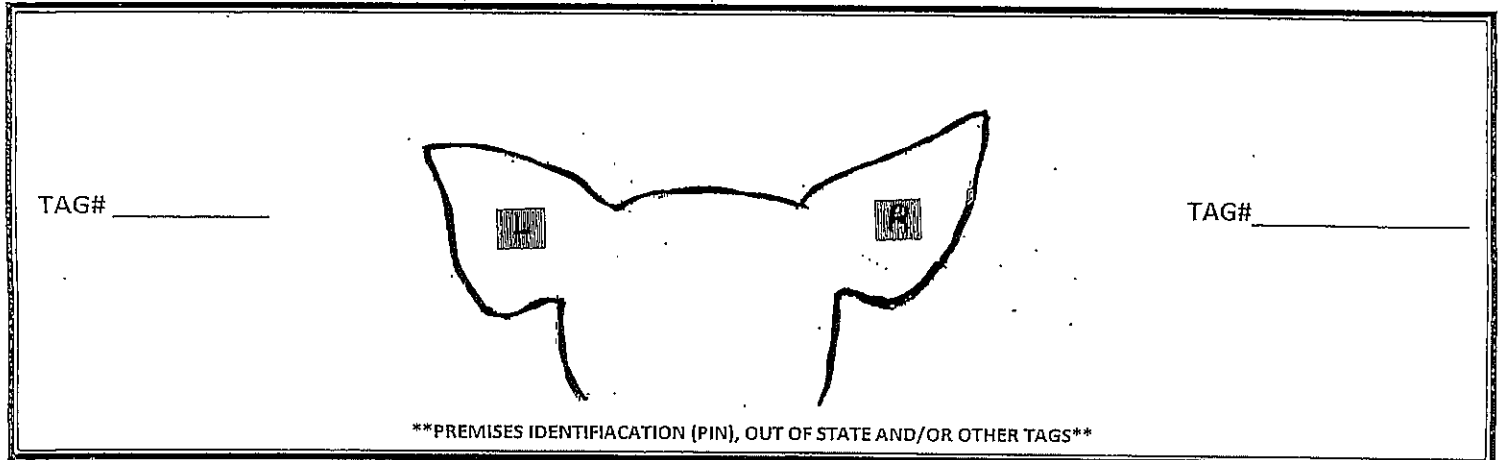
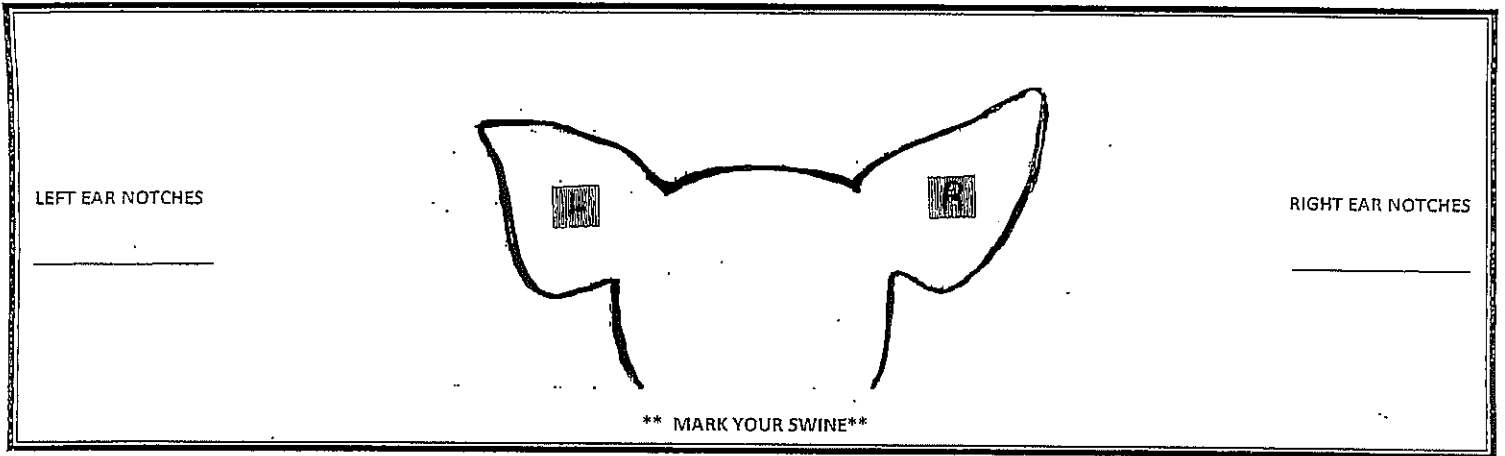
B.F.F. TAG #: _____

UNIVERSAL EAR NOTCHING SYSTEM



The easiest method of reading ear notches is looking down on the pig's head from behind the ears. The right ear will be on your right side, while the left ear will be on your left side. This method helps avoid mixing up the pigs right and left ear.

Example for Reading Ear Notches above: Right Ear (81 + 9 + 3 + 1 = 94) Left Ear (3 + 1 = 4) Therefore, the above pig's Identification is 94-4.



**FUR & FEATHERS
PHOTO RELEASE FORM**

Photo Number: _____

Photo Description: _____

ADULT:

I hereby give permission to The Big Fresno Fair to use my photograph taken by The Big Fresno Fair photographer in future Big Fresno Fair publicity advertisements or other publicity use.

Print Name

Signature

Date: _____

CHILDREN 18 AND UNDER:

I, _____, parent/guardian of _____, give permission to The Big Fresno Fair to use the photographs taken of my child by The Big Fresno Fair photographer in future Big Fresno Fair publicity advertisements or other publicity use.

Child's Name (Print)

Parent's Name (Print)

Parent/Guardian Signature

Date: _____

Check one: Market_____ Breeding_____ Year_____
Breed:_____ SEX_____

Leg Band Number:_____

JUNIOR DIVISION
THE BIG FRESNO FAIR
POULTRY HEALTH INSPECTION

EXHIBITOR: _____

CLUB /CHAPTER: _____

DATE: ACCEPTED:_____DISQUALIFIED: _____

INSPECTOR'S SIGNATURE:_____

Breeding_____ Year _____
Breed:_____ SEX_____

Leg Band Number:_____

OPEN DIVISION
THE BIG FRESNO FAIR
POULTRY HEALTH INSPECTION

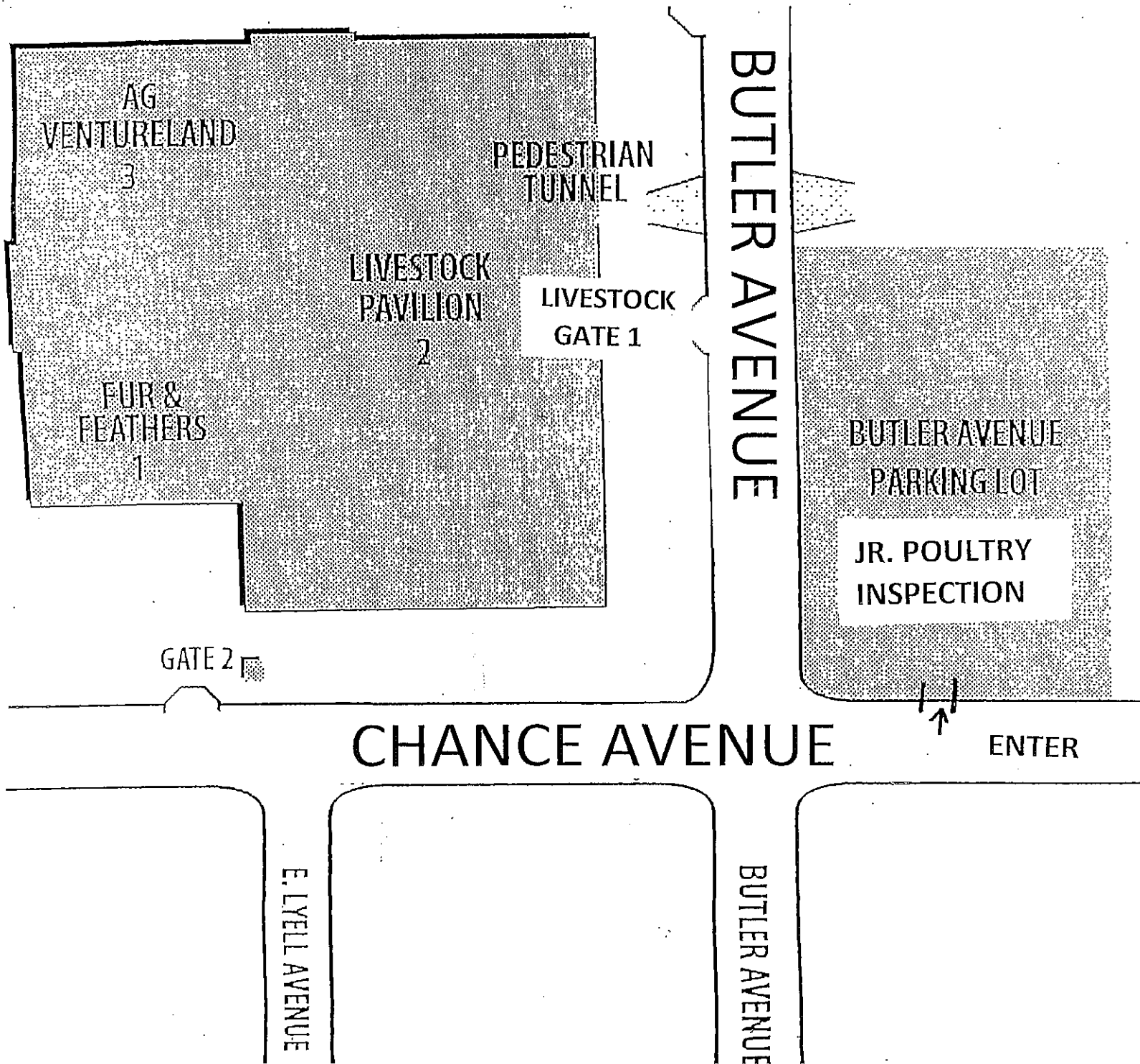
EXHIBITOR: _____

CLUB /CHAPTER:_____

DATE: ACCEPTED:_____DISQUALIFIED: _____

INSPECTOR'S SIGNATURE: _____

Poultry Inspection Area for Jr. Fur & Feathers
Sunday October 2, 2016 - 8:00 a.m. to 2:00 p.m.



THE BIG FRESNO FAIR
1121 S. Chance Avenue, Fresno, CA 93702-3707

AWARDS DONOR – 2016

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBER: _____

AMOUNT OF DONATION: _____

CASH: _____ CHECK: _____ CREDIT CARD: _____

AREA I WISH TO SUPPORT: 4-H _____ FFA _____ INDEPENDENT _____

BEEF: MARKET _____ BREEDING _____ SHOWMANSHIP _____

DAIRY: REPLACEMENT HEIFER _____ SHOWMANSHIP _____

PROSPECT REPLACEMENT HEIFER _____

REGISTERED CATTLE _____ GRADE CATTLE _____

SWINE: MARKET _____ BREEDING _____ SHOWMANSHIP _____

SHEEP: MARKET _____ BREEDING _____ SHOWMANSHIP _____

DAIRY GOATS: MARKET _____ BREEDING _____

SHOWMANSHIP _____ UDDER _____

MEAT GOATS: MARKET _____ BREEDING _____ SHOWMANSHIP _____

PYGMY GOATS: BREEDING _____ SHOWMANSHIP _____

RABBITS: BREED _____ MARKET _____ SHOWMANSHIP _____

POULTRY: CHICKENS _____ TURKEYS _____ SHOWMANSHIP _____

SPECIAL EVENTS:

LADS & LADIES LEAD / BEEF BEAUS AND BELLES _____

ROUND ROBIN _____

PEEWEE SHOWMANSHIP _____

RATE OF GAIN CONTEST – SPECIFY SPECIES _____

KIDS' BREAKFAST _____

ANY OTHER AREA OR COMMENT _____

QUESTIONS? PLEASE CALL THE LIVESTOCK OFFICE AT (559) 650-3292.

MAIL DONATIONS TO: The Big Fresno Fair
1121 S. Chance Avenue
Fresno, CA 93702-3707

OFFICIAL USE ONLY

DATE & TIME TURNED IN _____

APPOINTMENT TIME _____

**APPLICATION FOR 4-H & FFA CHAMPION OF EXCELLENCE
AT THE BIG FRESNO FAIR**

SPECIES APPLIED FOR _____

MEMBER NAME _____ AGE _____

CLUB/CHAPTER _____ YEARS IN 4-H _____ FFA _____

LEADER/ADVISOR SIGNATURE _____

PARENT/GUARDIAN SIGNATURE _____

MEMBER SIGNATURE _____

PLEASE INCLUDE YOUR 500 WORDS OR LESS DESCRIPTION/DISCUSSION OF
YOUR FAIR PROJECT. THIS MAY BE HANDWRITTEN OR TYPED. USE SPACE
BELOW AND BACK IF NEEDED.

OFFICIAL USE ONLY

APPLICATION RECEIVED: _____

APPOINTMENT DATE: _____

TIME: _____

NOTICE: Please arrive 5 minutes prior to your appointment time. Please bring this completed form to your interview.

**CHAMPION OF EXCELLENCE – Current Year
THE BIG FRESNO FAIR**

Name: _____
(PLEASE PRINT)

Specie: _____

Placing in Showmanship and/or Round Robin: _____

Placing in Market Classes: _____

(SPECIFY CLASS) _____

Placing in Breeder Classes: _____

(SPECIFY CLASS) _____

Champion and Reserve Champions: _____

Signature: _____

GRAGNANI FAMILY MEMORIAL OUTSTANDING LIVESTOCK EXHIBITOR AWARD

Application Due Date: September 23, 2016

The presentation of the Outstanding Livestock Exhibitor belt buckle was established through the generous donation of the Gragnani families.

Exhibitors wishing to apply for the Gragnani Family Memorial Award must:

- ◆ be a junior or senior student;
- ◆ be exhibiting at The Big Fresno Fair;
- ◆ express a willingness to further their education toward an agricultural career;
- ◆ be a well-rounded youth – participating in school and community activities;
- ◆ have maintained a "B" (3.0) GPA while attending high school;
- ◆ be active in a 4-H/FFA/Independent organization in Fresno County.

This application must be accompanied by the following items:

- Sealed letters of recommendation from a 4-H Project Leader and 4-H Community Club Leader, or an FFA Project Advisor and FFA Chapter Advisor, or an Independent Leader with verification of this application;
- Verification by project advisor/leader/adult;
- High School Transcript.

An oral interview may be held for final selection. Applicant will be contacted for date, time and location if an interview is necessary.

GRAGNANI FAMILY MEMORIAL OUTSTANDING LIVESTOCK EXHIBITOR AWARD

Date: _____

Application includes: <ul style="list-style-type: none"> <input type="checkbox"/> This application <input type="checkbox"/> Verification of application by advisor/leader <input type="checkbox"/> <i>Sealed</i> letters of recommendation from a 4-H Project Leader and your 4-H Community Club Leader <input type="checkbox"/> <i>Sealed</i> letters of recommendation from an FFA Project Advisor and FFA Chapter Advisor <input type="checkbox"/> <i>Sealed</i> letters of recommendation from an Independent Leader and other adult 	
NAME	
ADDRESS	
PHONE	AGE
CLUB/CHAPTER	YEAR IN 4-H/FFA/INDEPENDENT

Briefly describe in a short paragraph your participation and/or thoughts in the following areas.
(Please type in black ink.)

MAJOR LIVESTOCK PROJECTS (include past years and livestock exhibited at The Big Fresno Fair)

LIVESTOCK ACTIVITIES AND/OR WORK EXPERIENCE

OUTSTANDING HONORS AND/OR ACCOMPLISHMENTS

MAJOR ACTIVITIES OTHER THAN 4-H, FFA, INDEPENDENT (school, church, community, etc.)

Write a brief paragraph explaining how your 4-H, FFA, Independent experiences have influenced you and promoted growth in attitudes and leadership.

Outline your college plans and discuss your career goals.

VERIFICATION

I, _____, project advisor/leader, have reviewed and verify the above information to be accurate to the best of my knowledge.

[Signature]

Date: _____

**GRAGNANI FAMILY MEMORIAL
OUTSTANDING LIVESTOCK EXHIBITOR AWARD**

Evaluation Form

Point values are given based on the evaluation of information from the application questions.

CATEGORY EVALUATED	POINTS POSSIBLE	POINTS EARNED
Complete application	10	
Letters of recommendation	10	
Club activity	15	
Club leadership	15	
Community leadership	15	
Citizenship	20	
Other activity and leadership	5	
Career goals	10	
TOTAL	100	

*An interview may be necessary for final decision. Applicant will be contacted for date, time and location.

CAROLEE BOELE MEMORIAL SCHOLARSHIP

Application Due Date: December 2, 2016

The Carolee Boele Memorial Scholarship was established through the generous donations of 4-H, FFA, Independent youth, and families and close friends of Carolee Boele. Through this fund a \$500.00 scholarship is available to all Fresno County 4-H, FFA and Independent youth in their senior year in high school.

Youth wishing to apply for the Carolee Boele Memorial Scholarship must:

- have exhibited at The Big Fresno Fair;
- express a willingness to further their education at a college of their choice;
- be a well-rounded youth – participating in school and community activities;
- have maintained a "B" (3.0) GPA while attending high school;
- be active in the 4-H/FFA/Independent organization in Fresno County;
- provide an up-to-date Record Book for judging.

This application must be accompanied by the following items:

- Up-to-date Record Book
- Sealed letters of recommendation from a 4-H Project Leader and 4-H Community Club Leader, or an FFA Project Advisor and FFA Chapter Advisor, or an Independent Leader
- High School Transcript

Oral interview will be held for final selection. Applicant will be contacted for date, time and location of interview.

Recipient will receive a \$500.00 scholarship **after completing his/her first year** of college as a full-time student (24 units or more) and having maintained a "C" (2.0) GPA for that year.

CAROLEE BOELE MEMORIAL SCHOLARSHIP APPLICATION

Date: _____

Application includes: <input type="checkbox"/> This application <input type="checkbox"/> Up-to-date Record Book <input type="checkbox"/> <i>Sealed</i> letters of recommendation from a 4-H Project Leader and your 4-H Community Club Leader <input type="checkbox"/> <i>Sealed</i> letters of recommendation from an FFA Project Advisor and FFA Chapter Advisor <input type="checkbox"/> <i>Sealed</i> letters of recommendation from an Independent Leader	
NAME	
ADDRESS	
PHONE	AGE
CLUB/CHAPTER	YEAR IN 4-H/FFA/INDEPENDENT

Briefly describe in a short paragraph your participation and/or thoughts in the following areas.
(Please type in black ink.)

MAJOR/PROJECTS

MAJOR ACTIVITIES

OUTSTANDING HONORS AND/OR ACCOMPLISHMENTS

MAJOR ACTIVITIES OTHER THAN 4-H, FFA, INDEPENDENT (school, church, community, etc.)

Write a brief paragraph explaining how your 4-H, FFA, Independent experiences have influenced you and promoted growth in attitudes and leadership.

Outline your college plans and discuss your career goals.

**CAROLEE BOELE
MEMORIAL SCHOLARSHIP AWARD**

Evaluation Form

Point values are given based on the evaluation of information from the application questions.

CATEGORY EVALUATED	POINTS POSSIBLE	POINTS EARNED
Complete application	10	
Letters of recommendation	10	
Club activity	15	
Club leadership	10	
Community leadership	10	
Citizenship	20	
Other activities and leadership	5	
Career goals	5	
Record Book	15	
TOTALS	100	