



# BRISTOL JUNIOR STEER SHOW AND SALE OFFICIAL ENTRY FORM



PLEASE PRINT OR TYPE

SUBMIT ENTRIES BY **JANUARY 15, 2018** TO: SMYTH COUNTY EXTENSION OFFICE; 121 BAGLEY CIRCLE, SUITE 434; MARION, VA 24354

NAME \_\_\_\_\_ 4-H \_\_\_ FFA \_\_\_ CLUB/CHAPTER \_\_\_\_\_

ADDRESS \_\_\_\_\_ COUNTY \_\_\_\_\_

TOWN & STATE \_\_\_\_\_ T-SHIRT SIZE (CIRCLE): SMALL MEDIUM LARGE XL Other: \_\_\_\_\_

ZIP \_\_\_\_\_ PHONE \_\_\_\_\_ Number of Meal Tickets (Lunch): \_\_\_\_\_

E-MAIL \_\_\_\_\_

\*AGE RANGE IS AS OF MAY 1, 2018

AGE (✓) \_\_\_\_\_ Exhibitor 9 - 11 years of age on day of show\*  
\_\_\_\_\_ Exhibitor 12 - 14 years of age on day of show\*  
\_\_\_\_\_ Exhibitor 15 - 19 years of age on day of show\*  
\_\_\_\_\_ Novice - 9 to 12 years of age on day of show\* First time showing at Bristol Show. Novice Date of Birth \_\_\_\_\_

**REGISTRATION FEE: \$25.00 PER STEER  
CHECKS PAYABLE TO: SWVA Ag Assoc.**

### STEER 1

EAR TAG # \_\_\_\_\_ eID # \_\_\_\_\_ WEIGHT \_\_\_\_\_ DATE CALVED \_\_\_\_\_ DATE WEIGHED \_\_\_\_\_

DATE OBTAINED BY EXHIBITOR \_\_\_\_\_ BREEDER \_\_\_\_\_ BREEDER CITY/STATE \_\_\_\_\_

### STEER 2

EAR TAG # \_\_\_\_\_ eID # \_\_\_\_\_ WEIGHT \_\_\_\_\_ DATE CALVED \_\_\_\_\_ DATE WEIGHED \_\_\_\_\_

DATE OBTAINED BY EXHIBITOR \_\_\_\_\_ BREEDER \_\_\_\_\_ BREEDER CITY/STATE \_\_\_\_\_

Steer Entry Fee: \$25.00 per steer	Number of Steers Entered _____	Total Entry Fee Enclosed _____
	<i>Make checks payable to: SWVA Ag Assoc</i>	<b>TOTAL PAYMENT ENCLOSED</b> _____

We hereby certify that the above information is correct and that this steer is eligible for entry in the Bristol Junior Steer Show. The weight reported above was obtained under standard weighing conditions on approved scales between November 15, 2017 and January 1, 2018.

Signed: \_\_\_\_\_  
**Exhibitor**

Signed: \_\_\_\_\_  
**Extension Agent or Agriculture Instructor**

Date: \_\_\_\_\_

**Advisor's County/School** \_\_\_\_\_

**OFFICE USE ONLY**  
PAID \_\_\_ CHECK # \_\_\_\_\_  
INITIAL \_\_\_\_\_

If you are a person with a disability and desire any assistive devices, services or other accommodations to participate in this activity, please contact the Sullivan County Extension Office at 423-574-1919 during business hours of 8:00 a.m. and 5:00 p.m. to discuss accommodations 5 days prior to the event. \*TTY number is (800) 848-0298.

### SEE BACK ↵

The University of Tennessee Extension offers its programs to all eligible persons regardless of race, color, national origin, sex, age or disability and is an Equal Opportunity Employer. Virginia Cooperative Extension programs and employment are open to all, regardless of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation, genetic information, marital, family, or veteran status, or any other basis protected by law. An equal opportunity/affirmative action employer. Issued in furtherance of Cooperative Extension work, Virginia Polytechnic Institute and State University, Virginia State University, and the U.S. Department of Agriculture cooperating. Edwin J. Jones, Director, Virginia Cooperative Extension, Virginia Tech, Blacksburg; Jewel E. Hairston, Administrator, 1890 Extension Program, Virginia State, Petersburg.

**RELEASE, WAIVER, AND INDEMNIFICATION**

The undersigned participant, and his or her parent or legal guardian, if the participant is under the age of 18 years, does/do hereby execute this release, waiver, and indemnification for himself or herself/themselves and his or her/their heirs, successors, representatives, and assigns and, thereby, agree(s) and represent(s) as follows:

To release the Washington County Fair Association, its members, employees, agents, representatives, subsidiary corporations, and those governmental agencies and other organizations affiliated with this activity from any and all liability, loss, damage, costs, claims, and/or cause of action, including but not limited to all bodily injuries and property damage arising out of participation in the activity, it being specifically understood that said activity includes the handling of livestock and equine by the undersigned participant. The undersigned person(s) further agree(s) to indemnify the Washington County Fair Association, its employees, members, agents, representatives, and those governmental agencies and other organizations affiliated with this project, and hold them harmless for any liability, loss, damage, cost, claim judgment, or settlement which may be brought or entered against them as a result of the undersigned person's participation in said activity.

Furthermore, if involved in equine activities pursuant to Section 3.1-796.132 of the Code of Virginia the undersigned(s) execute(s) this waiver of the undersigned(s)' rights to sue and agree(s) to assume all risks inherent in equine activities and have notice of all the risks inherent in equine activities including (k) the propensity of equine to be have in dangerous ways which may result in injury to the participant; (ii) the inability to predict an animal's reaction to sound, movements, objects, persons, or other animals; (iii) hazards of surface or subsurface conditions.

This waiver shall remain valid unless expressly revoked by the participant or parent or guardian of a minor. The revocation shall be in writing which shall be delivered to the provider and shall become effective thirty (30) days after delivery to the provider.

In the case of school-, college-, and university-sponsored classes and programs, waivers executed by a participant or parent or guardian of a participant shall apply to all livestock or equine activities in which the participant is involved in the next succeeding twelve (12) month period unless earlier expressly revoked in writing. The revocation shall become effective thirty (30) days after it is delivered to the provider.

The undersigned(s) will maintain all medical and health insurance needed to cover all risks of any kind in any place in livestock, equine, and/or other activities.

I, the undersigned participant, will wear and use all safety equipment, including hard hats, hunting caps and other protection, and use safe stirrups, leathers, and other tack and equipment at all times in equine activities.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Legal Guardian  
if Participant is under 18 years of age

\_\_\_\_\_  
Relationship