



Please Print or Type All Entry Information

2017 MID-ATLANTIC FALL ROUND-UP

ROCKINGHAM FAIRGROUNDS - HARRISONBURG, VIRGINIA October 21, 2017



<u>Deadline for Entries - Must be Postmarked by</u> 10/14/2017 Please type or print clearly

| Breeder Number: | Birth Date: | | | | | | |
|---|--------------------|--|--|--|--|--|--|
| Telephone: | | | | | | | |
| Name: | | | | | | | |
| Address: | | | | | | | |
| City,State, Zip: | | | | | | | |
| Email Address: | | | | | | | |
| Amount Enclosed: | Number of Entries: | | | | | | |
| Entry Fee through October 14, 201 <u>7</u> , \$35 per animal. | | | | | | | |
| Registrations will not be accepted on show day. | | | | | | | |
| Mail fee and Registration to: Kent Firestone, 1204 Airport Road, Blacksburg, VA 24060 | | | | | | | |

Animals are encouraged to be in the barn by 5:00pm Friday, October 20, 2017. Deadline for animals to be in the barn is 8:00am Saturday, October 21, 2017. For questions, contact Kent Firestone at 560-603-0133, email kentpolo@vt.edu or Herk Williams at 540-460-6194.

I hereby make application to enter the animal(s) listed below for premiums at the 2017 Mid-Atlantic Fall Round-Up, subject to the rules and regulations as published, of which I agree to the provisions contained therein. I hereby release and will not hold the sponsoring State Hereford Associations, the Mid-Atlantic Fall Round-Up organizers or affiliated parties responsible for accident, loss or injury to any person, animal, equipment or articles.

Please indicate with an "X" which show/shows you wish to participate in.

Name of Animal Sex Birth Date Tattoo **Registration Number** Name of Sire and Dam **Registration Numbers Entry Class** Junior Show Open Show Sire RE LE Dam RE Sire LE Dam RE Sire Dam

| | | | _ | | | | | | |
|--|--|---|----|------|--|--|---|--|--|
| | | | RE | Sire | | | | | |
| | | | LE | Dam | | | | | |
| | | | RE | Sire | | | | | |
| | | | LE | Dam | | | | | |
| | | | RE | Sire | | | - | | |
| | | | LE | Dam | | | | | |
| | | | RE | Sire | | | | | |
| | | | LE | Dam | | | | | |
| | | | RE | Sire | | | | | |
| | | | LE | Dam | | | | | |
| | | į daras ir salas ir s | RE | Sire | | | | | |
| | | | LE | Dam | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| Attach a Xerox copy of your registration papers. | | | | |
|---|---------------------|------|------------------------------|------|
| Questions? call Charlie Williams VHA Jr. Advisor 540-460-6194 | Exhibitor Signature | Date | Parent or Guardian Signature | Date |