3JIM WELLS COUNTY FAIR
BREEDING GOAT DIVISION **DATE: Saturday, August 03, 2024**
FAMILY VALIDATION FORM

INSTRUCTIONS:
ONE FORM PER FAMILY
COMPLETE SECTION 1 FOR EACH EXHIBITOR IN FAMILY
PLEASE PRINT
PRESENT THIS FORM TO VALIDATION OFFICIALS AT TIME OF PROCESSING
NOTE: *This is **not** an entry card*

SECTION 1

NAME(S) OF EXHIBITOR(S) List each exhibitor individually	DATE OF BIRTH	NAME OF 4-H CLUB OR FFA CHAPTER (Example: Alice FFA, Lone Star 4-H)	NAME OF SCHOOL (CAMPUS) ATTENDING 2024-2025 (Example: Alice High School, Salazar Elementary)	GRADE 2024-2025
EXHIBITOR 1.	1>	1>	*1>*	1>
EXHIBITOR 2.	2>	1>	*2>*	2>
EXHIBITOR 3.	3>	3>	*3>*	3>
EXHIBITOR 4.	4>	4>	*4>*	4>
EXHIBITOR 5.	5>	5>	*5>*	5>
EXHIBITOR 6.	6>	6>	*6>*	6>

EXHIBITOR'S COMPLETE MAILING ADDRESS	PHYSICAL ADDRESS **(LOCATION WHERE ANIMAL(S) WILL BE KEPT)**	EXHIBITOR'S PHONE NUMBER /EMAIL
		( ) **EMAIL:**

NAME OF FATHER OR GUARDIAN	NAME OF MOTHER OR GUARDIAN

EAR TAG #	**SEX**	**DATEOF BIRTH**	**EAR TAG #**	**SEX**	**DATE OF BIRTH**	**EAR TAG #**	**SEX**	**DATE OF BIRTH**	**EAR TAG#**	**SEX**	**DATE OF BIRTH**