JIM WELLS COUNTY FAIR

DATE: 1st SATURDAY OF AUGUST (08/02/2025

CHECK ALL THAT APPLY

PLEASE PRINT

JUNIOR BEEF HEIFER DIVISION (JB)

TIME: 8:00 AM - 10:00 AM COMMERCIAL HEIFER DIVISION (C)

SCRAMBLE HEIFER DIVISION (S)

LOCATION: JIM WELLS COUNTY FAIR GROUNDS

NOTE: NOT AN ENTRY CARD

FAMILY HEIFER VALIDATION FORM

ONE (1) FORM PER FAMILY - ENTER ALL EXHIBITORS IN FAMILY

SECTION 1

| Completed by Exhibitor | | | | | | | | | | | |
|------------------------|---------------|--|--|--------------------|--|--|--|--|--|--|--|
| NAME OF EXHIBITOR(S) | DATE OF BIRTH | NAME OF 4-H CLUB OR FFA CHAPTER (Example: Alice FFA; Lone Star 4-H) | NAME OF SCHOOL (ATTENDING 2025-2026) (Example: Alice High School; Salazar Elementary) | GRADE 2025-2026 | | | | | | | |
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| 5 | | | | | | | | | | | |

| EXHIBITOR'S MAILING ADDRESS | | PHYSICAL ADDRESS (WHERE HEIF | ER WILL BE KEPT) | EXHIBITOR'S PHONE NUMBER & E-MAIL |
|-----------------------------|-----------|------------------------------|------------------|-----------------------------------|
| Street or PO Box: | | Street: | | Phone #: |
| | | | | |
| City: | | <u>City:</u> | | |
| | | | | E-mail |
| State: Texas | Zip Code: | State: Texas | Zip Code: | |

| NAME OF FATHER OR GUARDIAN | | | | | Phone # | NAME OF MOTHER OR GUARDIAN | | | | | | Phone # | | |
|----------------------------|---------------|-------|----|---|-----------|----------------------------|---------------|---|-------|----|---|---------|--------|--|
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| | | | | | SECTION 2 | | | | | | | | | |
| | | | | | | Completed by Validation | on Staff | | | | | | | |
| EAR TAG # / BRAND | DATE OF BIRTH | BREED | JB | С | S | EAR TAG # / BRAND | DATE OF BIRTI | H | BREED | JB | С | S | NOTES: | |
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