

SWINE DOCUMENTATION FORM – 2020

This form must be filled out and provided to the applicable species superintendent or their designee upon check-in at the fairgrounds.

Exhibitor Name _____	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Exhibitor Date of Birth _____ Month _____ Day _____ Year (used to determine exhibitor eligibility)		
Address _____		City _____ Zip _____
Phone _____	Cell # _____	
Email address _____		
Text messages and email will only be used if needed to contact the exhibitor related to their exhibits. Parents/Guardian		
Name(s) _____		
4-H Club Name (if applicable) _____		

Animal Owner Name _____

Animal Owner Address (if different than exhibitor) _____

Animal Owner Contact Phone _____

Premises I.D. # _____

	<u>SWINE #1</u>	<u>SWINE #2</u>	<u>SWINE #3</u>	<u>SWINE #4</u>
BREED.....	_____	_____	_____	_____
SWINE DATE OF BIRTH	_____	_____	_____	_____
RIGHT EAR TAG NO.	_____	_____	_____	_____
LEFT EAR TAG NO.	_____	_____	_____	_____

Please check the following boxes verifying the required items are completed and attached.

ATTACHED: Wisconsin Intrastate Certificate of Veterinary Inspection form.

Veterinarian Name: _____

Date Completed: _____

Form includes signed statement from vet stating: *“Herd of origin was inspected on the farm within 30 days prior to movement to the fair and showed no signs of disease.”*