Exhibitor Last Name (Print)	

SAUK COUNTY FAIR ANIMAL ID & VET CHECK INFORMATION

This form must accompany your animals upon arrival at the Sauk County Fair. (This completed form will be required for each load at the livestock entry gate on entry day.)

		Date:					
Exhibitor Name	Name Phone No						
Address							
*Load No of Loads Number of animals on this load *If more than one load is brought to the Fairgrounds.							
	form as you load you ad at the livestock ent d forms.						
Fair Office per Dep	e vet inspection certi- partment of Agricult vill not be returned t	ure, Trade	& Consumer P	rotection (DATCP)	rules and regulation	ons.	
Type of Animal	Breed	Sex	Age	Type of Identification	Identification No.		
						-	
						_	
						_	
						_	
Exhibitor/Hauler				Date			
Checked In by:							
County Fair Veteri	narian			Date			

Questions? Call the Sauk County Agricultural Society Fair Office at 356-8707.