## 2025 Market Animal Weigh-in Form

| Evh                                    | ibitor Nama  |               |                              |                                       |                 |   | Darant Dhana                       | #   |                             |
|--|--|---------------|------------------------------|---------------------------------------|-----------------|---|------------------------------------|---|-----------------------------|
| Exhibitor Name<br>Full Mailing Address |  |               |                              |                                       |                 |   |                                    |   |                             |
|  |  |               |                              |                                       |                 |   |                                    |   |                             |
| ID                                     |  | #             | Birth                        |                                       |                 |   | Sample?                            |   | (Yes or No)                 |
|  |  |               |                              |                                       |                 |   |                                    |   |                             |
|  |  |               |                              |                                       |                 |   |                                    |   |                             |
|  |  |               |                              |                                       |                 |   |                                    |   |                             |
|  |  |               |                              |                                       |                 |   |                                    |   |                             |
|  |  |               |                              |                                       |                 |   |                                    |   |                             |
|  |  |               |                              |                                       |                 |   |                                    |   |                             |
|  |  |               |                              |                                       |                 |   |                                    |   |                             |
|  | ify that the above                                   | e listed anim | nals are owned               | by me a                               | nd are being ca | red for as a part of my 4-                                | -H or FFA project a                | maximum of 5 pigs may be w<br>nd that I am a member in go | ood standing in the 4-I     |
|  | ify that the above                                   | e listed anim | nals are owned               | by me a                               | nd are being ca | red for as a part of my 4-                                | -H or FFA project a                | nd that I am a member in go                               | ood standing in the 4-I     |
|  | ify that the above                                   | e listed anim | nals are owned               | by me a                               | nd are being ca | red for as a part of my 4-                                | -H or FFA project a                | nd that I am a member in go<br>(Name of School)           | ood standing in the 4-I     |
|  | ify that the above                                   | e listed anim | nals are owned               | by me a                               | nd are being ca | red for as a part of my 4-<br>or the                      | -H or FFA project a                | nd that I am a member in go<br>(Name of School)<br>Date   | ood standing in the 4-I<br> |
|  | ify that the above                                   | e listed anim | nals are owned               | by me a                               | nd are being ca | red for as a part of my 4-<br>or the                      | -H or FFA project a<br>FFA Program | nd that I am a member in go<br>(Name of School)<br>Date   | ood standing in the 4-I<br> |
| I cert                                 | ify that the above<br>Signature of                   | e listed anim | nals are owned<br>(Name      | by me a                               | nd are being ca | red for as a part of my 4-<br>or the                      | -H or FFA project a<br>FFA Program | nd that I am a member in go<br>(Name of School)<br>Date   | ood standing in the 4-<br>  |
| Note:                                  | ify that the above<br>Signature of<br>E time of show | e listed anim | nals are owned<br>(Name<br>C | by me a<br>of Club)<br>vate<br>weight | nd are being ca | red for as a part of my 4-<br>or the<br>Signature of Proj | -H or FFA project a<br>FFA Program | nd that I am a member in go<br>(Name of School)<br>Date   | ood standing in the 4-1     |

Mail completed form and payment of \$20.00 to Osage County Youth Fair Board, P.O. Box 1051, Linn, MO 65051 by April 1, 2024. Make checks payable to Osage County Fair Board