

## 2018 SOUTHEASTERN YOUTH FAIR DOG AGILITY SHOW ENTRY

**A \$10.00 entry fee must accompany entry form. Make checks payable to the Southeastern Youth Fair. No forms will be accepted without payment. Online payment is available. See seyfair.com (fee includes one or ALL dog shows)**

**DEADLINE FOR ENTRY: December 1, 2017**

*Proof of vaccinations signed by your veterinarian must be turned in with record book.  
No dog will be allowed to enter the show without this verification.*

**PLEASE CHECK IF YOU ARE PARTICIPATING IN: DOG SKILL-A-THON \_\_\_\_\_**

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 HOME MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PARENT OR GUARDIAN: \_\_\_\_\_ HOME PH: \_\_\_\_\_  
 WORK PH: \_\_\_\_\_ CELL PH: \_\_\_\_\_  
 E-MAIL: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

*Please check **ONE** of the following. Once this entry is received by the Fair office, this designation cannot be changed.*

I am entering this show as a 4-H member of \_\_\_\_\_ Club.  
 I am entering this show as an FFA member of \_\_\_\_\_ Chapter.

**AGILITY BOX**

Dog's Name	Breed	Sex	Elementary	Sub-Novice	Novice	Advanced	8"	12"	16"	20"	24"

**\*Name of training facility or trainer you are currently training with:** \_\_\_\_\_  
**\*Phone Number and Name of Contact:** \_\_\_\_\_

I hereby request permission to participate in the 2018 Southeastern Youth Fair Dog Agility Show. I have read and will abide by all the rules of competition pertaining to this show as listed in the current SEYF Rules and Regulations posted on the website. ([seyfair.com](http://seyfair.com))

**Exhibitor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I have agreed to allow this child to participate in the 2018 Southeastern Youth Fair Dog Agility/Rally Show. I have read and will abide by all the rules and regulations as listed in the current SEYF Rules and Regulations posted on the website. I understand that it is my responsibility to ensure that this child follows all the rules and regulations of the Southeastern Youth Fair.

**\*REQUIRED**  
**\*Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**\*Leader/Advisor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**INCOMPLETE OR INACCURATE ENTRIES WILL NOT BE ACCEPTED.**

**IT IS ADVISED THAT YOU MAKE A COPY OF THIS ENTRY FOR YOUR RECORDS.**

SOUTHEASTERN YOUTH FAIR  
 P.O. BOX 404  
 Ocala, FL 34478

8/28/2017

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