

# SKOWHEGAN STATE FAIR

## 2025

### LIVESTOCK SHOWS, PULLING & EVENTS - ENTRY FORM

Complete the following form for all entries for Livestock Departments. Use a separate form for each person entering.

**All entries should be forwarded to the Fair Office - PO Box 39, Skowhegan, Maine 04976.**

See each department for entry deadlines. Please list all entries as they appear in Premium Book.

NAME: \_\_\_\_\_ FARM: \_\_\_\_\_  
(name to be announced in show rings) (name to be announced in show rings)

NAME TO PRINT ON PREMIUM CHECK: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ ENTER AGE FOR 4-H/YOUTH ENTRY: \_\_\_\_\_

ENTRY FEE: \_\_\_\_\_

DATE TO ARRIVE: \_\_\_\_\_

**CHECK DAYS LIVESTOCK WILL BE ON FAIRGROUNDS.**

T	F	S	S	M	T	W	T	F	S
---	---	---	---	---	---	---	---	---	---

PULLING DEPARTMENTS			
Dept No.	# Horses	# Farmers Steer/Oxen	# Tractors

STEER/OXEN DEPARTMENTS			
Dept No.	Breed	# Steer	# Oxen

THIS FORM  
MAY BE  
DUPLICATED

SHEEP DEPARTMENTS					
Dept No.	Breed	Ram or Ewe	# Yearlings (NO Yearling Rams)	# Lamb	# Market Lamb

**PLEASE ATTACH THE FOLLOWING TO YOUR ENTRY FORM:**

- Proof of Insurance**
- Signed & Sealed Approval Form**  
(4-H Entries)
- Medical Records**  
(if required - See Dept. Rules)
- Camping Form**  
(if you require a camping space)

**ALL OTHER DEPARTMENTS & EXHIBITOR SIGNATURE**  
**ALL FORMS MUST BE SIGNED BY EXHIBITOR**

