Addison County Fair & Field Days EGG JUDGING ENTRY FORM

Superintendent: Pam Gevry 759-2238, cell 373-8069

Please	bring this entry			ggs to the Children's Barnyard before	e 8:00 Monday night of fair week
Name:	:				
Addres	SS:				
Town:			State:	Zip:	
Phone	Number:				
Division:(check one) Open (Adult)			OR	Junior (Youth)	
	Oper	division must provide 1 dozer	n eggs for each class. Ju	nior division must provide 6 egg	s for each class.
	#	Class		Description	
		4-H & OTHER YOU	TH RABBIT SHO	k FIELD DAYS, INC. WMANSHIP ENTRY I Oute 22A, Addison, VT 0549	
Exhibitor Name:		Age:			
Address:			City:	State:	Zip:
Phone	Number:				
Name of Rabbit:		Age of Rabbit:			