

# 2020 SOLANO COUNTY FAIR ENTRY FORM

## FOR ALL EXHIBITOR ENTRIES – EXCEPT LIVESTOCK

One Exhibitor Per Form – Use Separate Form For Each Category – Forms May Be Photocopied

Dates of the 2020 Solano County Fair: Thursday, June 18 to Sunday, June 21, 2020

**ENTRY SUBMISSION DEADLINE: POSTMARKED BY WEDNESDAY, MAY 27, 2020**

<b>CATEGORY</b> <input type="radio"/> Solano Living <input type="radio"/> Fine Arts <input type="radio"/> Floriculture	<b>PROGRAM</b> <input type="radio"/> Adult <input type="radio"/> Youth <i>Indicate Group</i>	<b>YOUTH GROUP</b> <input type="radio"/> 4-H <input type="radio"/> FFA <input type="radio"/> Grange <input type="radio"/> Open	<b>MAIL OR DELIVER TO:</b> Solano County Fairgrounds Admin Office – Attn: Entries 900 Fairgrounds Drive Vallejo, CA 94589	<b>EXHIBITOR CODE</b> <i>SCFA Use Only</i>
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Entry No.	Enter Numbers from Guidebook			Brief Description of Entry (or Title)	Entry Fee
	Dept.	Division	Class		
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
<b>CHECK NO.</b>	<b>RECEIPT NO.</b>		<b>Make check payable to: SOLANO COUNTY FAIR</b>		<b>TOTAL ENTRY FEES</b>

### YOUTH DIVISION ENTRIES ONLY MUST COMPLETE THIS SECTION

#### Exhibitor's Age

on January 1, 2020 \_\_\_\_\_ Birth Date \_\_\_\_\_

The undersigned states that:

- He/she is the recognized supervisor of the project of which the above entries are a part;
- To his/her personal and actual knowledge, the statements regarding the same are true;
- He/she has read and has full understanding of the rules and regulations governing the same and agrees to be governed by them; and
- He/she acknowledges to have read and agrees to uphold the Solano Fair Exhibitor Agreement.

Club, Chapter, School or "None" \_\_\_\_\_

Printed Name and Signature of Instructor or Local Leader \_\_\_\_\_

Instructor/Leader Phone Number \_\_\_\_\_

Printed Name and Signature of Parent or Guardian \_\_\_\_\_

### FOR ADULT AND YOUTH ENTRIES

I certify that these entries comply with Local, State and Department rules contained in the Entry Guidebook.

Printed Name of Registered and/or Legal Owner \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Telephone \_\_\_\_\_

E-Mail \_\_\_\_\_

CALL (707) 551-2016 OR EMAIL ENTRIES@SCFAIR.ORG FOR INFORMATION AND ASSISTANCE ON COMPLETING THIS FORM

# YOUTH PRESENTATION ENTRY FORM

Exhibitor's Name

Exhibitor Number (Assigned by Fair):

Address

Phone

City, State, ZIP

Email

4-H – Identify Club, Chapter, School; Junior: Enter none.

Exhibitor Birth Date

Title of Presentation

Topic of Presentation

Length of Presentation (Minutes)

Do you need a table?

*Fair tables are 3 feet by 4 feet. Limited supply.*

☐ Yes

☐ No

Division

☐ Division 496 – 4-H

☐ Division 497 – Junior

Do you need an easel?

☐ Yes

☐ No

Class

☐ 1 – Age 5 to 8

☐ 2 – Age 9 to 11

☐ 3 – Age 12 to 14

☐ 4 – Age 15 to 18

Do you have any other space needs? Please be specific.

## Solano County Fair Youth Exhibitor Agreement

As a youth participant at Solano County Fair:

I believe my participation in the youth program should demonstrate my ability, knowledge and skill, and my own investment of time in my project that I am exhibiting. I will do my own work and accept only advice and support from others.

I will read and understand the rules and regulations found in the Solano County Fair Exhibitor Guidebook. I ask that my parents and advisor/leader of my project not break any rules or make exceptions on my behalf. I wish for my project to be an example of how to accept what life has to offer, good or bad, and how to live with the outcome.

I will not use abusive, questionable or unethical techniques in the construction, preparation, presentation or handling of my project. I will not resort to fraudulent, deceptive or illegal practices when preparing my project for exhibition.

I will also not allow my parent, advisor, supervisor/leader or any other adult or minor to employ such practices to my project.

I realize I am responsible for:

- The proper care treatment of my project;
- The presentation of my exhibit at the fair;
- The production of wholesome food, fiber, clothing and textile within current marketable practices;
- And the development of sound moral character in others and myself.

I understand that if I, my parents, advisor/leader or other adult or minor connected with my project, break the rules; I must live by the decision of Fair management.

Exhibitor's Signature

Date

Parent's Signature

Date

Leader/Advisor Signature

Date

# 2020 SOLANO COUNTY FAIR LIVESTOCK ENTRY FORM

## 2020 SOLANO COUNTY FAIR LIVESTOCK ENTRY FORM

*Dates of 2020 Solano County Fair: Thursday, June 18 to Sunday, June 21, 2020*

ENTRY SUBMISSION DEADLINE: MARKET BEEF, POSTMARKED BY WEDNESDAY, MARCH 25, 2020

ENTRY SUBMISSION DEADLINE: GOATS, SHEEP & SWINE POSTMARKED BY WEDNESDAY, APRIL 22, 2020

ENTRY SUBMISSION DEADLINE: ALL OTHER LIVESTOCK POSTMARKED BY WEDNESDAY, MAY 27, 2020

YQCA Certificate # \_\_\_\_\_

YQCA Completion Date \_\_\_\_\_

*One Exhibitor Per Form*

*Use Separate Form for Each Category*

Entry No. <small>SCFA Use Only</small>	Enter Numbers from Guidebook			Registration Number			Animal's Name	Breeder Name	Ear Tag, Leg or Tattoo	Sex	Date of Birth	Entry Fee	
	Dept.	Division	Class	Animal	Sire	Dam							
1													
2													
3													
4													
5													
6													
7													
8													
9													
CHECK NO.	RECEIPT NO.						Make check payable to: SOLANO COUNTY FAIR						TOTAL ENTRY FEES

### YOUTH DIVISION ENTRIES ONLY MUST COMPLETE THIS SECTION

Exhibitor's Age on January 1, 2020 \_\_\_\_\_ Birth Date \_\_\_\_\_

The undersigned states that:

- He/she is the recognized supervisor of the project of which the above entries are a part;
- To his/her personal and actual knowledge, the statements regarding the same are true;
- He/she has read and has full understanding of the rules and regulations governing the same and agrees to be governed by them; and
- He/she acknowledges to have read and agrees to uphold the Solano Fair Exhibitor Agreement.

Club, Chapter, School or "None" \_\_\_\_\_

Printed Name and Signature of Instructor or Local Leader \_\_\_\_\_

Instructor/Leader Phone Number \_\_\_\_\_

Printed Name and Signature of Parent or Guardian \_\_\_\_\_

### FOR ADULT AND YOUTH ENTRIES

I certify that these entries comply with Local, State and Department rules contained in the Entry Guidebook.

Printed Name of Registered and/or Legal Owner \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Telephone \_\_\_\_\_

E-Mail \_\_\_\_\_

Total Number of Animals Entered \_\_\_\_\_

Total Number of Pens / Tie Stalls Requested \_\_\_\_\_

☐ ADULT  
☐ YOUTH  
☐ 4-H  
☐ FFA  
☐ Grange  
☐ Open

EXHIBITOR CODE  
SCFA Use Only

MAIL OR DELIVER TO:

Solano County Fairgrounds  
Admin Office - Attn: Entries  
900 Fairgrounds Drive  
Vallejo, CA 94589

CALL (707) 551-2016 OR EMAIL  
ENTRIES@SCFAIR.ORG FOR  
INFORMATION AND ASSISTANCE ON  
COMPLETING THIS FORM

**SOLANO COUNTY FAIR ASSOCIATION  
FIRST AID PARENT PERMISSION FORM  
FOR LIVESTOCK EXHIBITORS**

Youth exhibiting livestock at the Solano County Fair is required to have the following form completed and signed by a parent/guardian. This First Aid Form must be submitted with your entry forms. This form must be on file before the exhibitor will be allowed on the fairgrounds with their animals. Parents/Guardians must file a "First Aid Parent Permission Form" for each exhibitor.

Exhibitors Name: \_\_\_\_\_ Age: \_\_\_\_\_

Of Chapter/Club/School: \_\_\_\_\_, has my permission to seek first aid treatment at

the Solano County Fair First Aid Station during his/her stay. In my absence, it is understood that our leader/advisor or designated onsite person

\_\_\_\_\_, who can be reached by calling their cell phone number \_\_\_\_\_  
Name of leader/advisor or designated person to be contacted Cell phone number

will be notified of any injury and will be promptly advised of what further medical treatment, if any, may be required.

Name of Emergency Contact Person, if parent cannot be reached: \_\_\_\_\_

Phone Number of Emergency Contact Person, if parent cannot be reached: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian name Printed \_\_\_\_\_ Emergency Contact Phone # \_\_\_\_\_

My child has had a Tetanus Toxoid Booster on this Date: \_\_\_\_\_

\_\_\_\_\_ My child has NO known allergies to medication or other product.

\_\_\_\_\_ My child IS ALLERGIC to the following medication(s)/product(s).  
\_\_\_\_\_

Other health concerns to be aware of: \_\_\_\_\_

# 2020 SOLANO COUNTY FAIR RABBIT ENTRY FORM

## 2020 SOLANO COUNTY FAIR RABBIT ENTRY FORM

Dates of 2020 Solano County Fair: Thursday, June 18 to Sunday, June 21, 2020

YQCA Certificate # \_\_\_\_\_

YQCA Completion Date \_\_\_\_\_

One Exhibitor Per Form  
Forms May Be Photocopied

ENTRY SUBMISSION DEADLINE: ALL OTHER LIVESTOCK POSTMARKED BY WEDNESDAY, MAY 27, 2020

Entry No. <i>SCFA Use Only</i>	Enter Numbers from Guidebook			Rabbit Information			Animal's Name	Breeder Name	Tattoo	Sex	Date of Birth	Entry Fee	
	Dept.	Division	Class	Breed	Color	Broken or Solid							
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
CHECK NO.	RECEIPT NO.						Make check payable to: SOLANO COUNTY FAIR						TOTAL ENTRY FEES

### YOUTH DIVISION ENTRIES ONLY MUST COMPLETE THIS SECTION

Exhibitor's Age \_\_\_\_\_ Birth Date \_\_\_\_\_  
 on January 1, 2020  
 The undersigned states that:  
 • He/She is the recognized supervisor of the project of which the above entries are a part;  
 • To his/her personal and actual knowledge, the statements regarding the same are true;  
 • He/She has read and has full understanding of the rules and regulations governing the same and agrees to be governed by them; and  
 • He/She acknowledges to have read and agrees to uphold the Solano Fair Exhibitor Agreement.

Club, Chapter, School or "None" \_\_\_\_\_  
 Printed Name and Signature of Instructor or Local Leader \_\_\_\_\_  
 Instructor/Leader Phone Number \_\_\_\_\_  
 Printed Named and Signature of Parent or Guardian \_\_\_\_\_

### FOR ADULT AND YOUTH ENTRIES

I certify that these entries comply with Local, State and Department rules contained in the Entry Guidebook.

Printed Name of Registered and/or Legal Owner \_\_\_\_\_  
 Signature \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, ZIP \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 E-Mail \_\_\_\_\_

Total Number of Animals Entered \_\_\_\_\_  
 Total Number of Pens / Tie Stalls Requested \_\_\_\_\_

EXHIBITOR CODE  
*SCFA Use Only*  
☐ ADULT  
☐ YOUTH  
☐ 4-H  
☐ FFA  
☐ Grange  
☐ Open

MAIL OR DELIVER TO:  
 Solano County Fairgrounds  
 Admin Office - Attn: Entries  
 900 Fairgrounds Drive  
 Vallejo, CA 94589  
 CALL (707) 551-2016 OR EMAIL  
 ENTRIES@SCFAIR.ORG FOR  
 INFORMATION AND ASSISTANCE ON  
 COMPLETING THIS FORM

**SOLANO COUNTY FAIR ASSOCIATION  
FIRST AID PARENT PERMISSION FORM  
FOR LIVESTOCK EXHIBITORS**

Youth exhibiting livestock at the Solano County Fair is required to have the following form completed and signed by a parent/guardian. This First Aid Form must be submitted with your entry forms. This form must be on file before the exhibitor will be allowed on the fairgrounds with their animals. Parents/Guardians must file a "First Aid Parent Permission Form" for each exhibitor.

Exhibitors Name: \_\_\_\_\_ Age: \_\_\_\_\_, has my permission to seek first aid treatment at  
Of Chapter/Club/School: \_\_\_\_\_  
the Solano County Fair First Aid Station during his/her stay. In my absence, it is understood that our leader/advisor or designated onsite person  
\_\_\_\_\_, who can be reached by calling their cell phone number \_\_\_\_\_  
Name of leader/advisor or designated person to be contacted Cell phone number

will be notified of any injury and will be promptly advised of what further medical treatment, if any, may be required.

Name of Emergency Contact Person, if parent cannot be reached: \_\_\_\_\_

Phone Number of Emergency Contact Person, if parent cannot be reached: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian name Printed \_\_\_\_\_ Emergency Contact Phone # \_\_\_\_\_

My child has had a Tetanus Toxoid Booster on this Date: \_\_\_\_\_  
\_\_\_\_\_  
My child has NO known allergies to medication or other product.  
\_\_\_\_\_  
My child IS ALLERGIC to the following medication(s)/product(s).  
\_\_\_\_\_

Other health concerns to be aware of: \_\_\_\_\_

# DOG SHOW ENTRY FORM

This show is open to residents of Solano County or members of a Solano County 4-H Club, FFA Chapter or Recognized Grange. Members should be regularly enrolled in a Dog Care and Training projects.

Exhibitor's Name	Exhibitor Number (Assigned by Fair):
Address	Phone
City, State, ZIP	Email
Club (4-H, FFA, Grange or Independent)	Exhibitor Birth Date

Dog's Name	Breed
Division <input type="checkbox"/> 695 – Junior: 13 & Under	<input type="checkbox"/> 7 – Graduate Novice <i>Any dog that has earned a CD</i>
<input type="checkbox"/> 696 – Senior: 14 to 18	<input type="checkbox"/> 8 – Showmanship Novice Junior
Class <input type="checkbox"/> 1 – Rally Obedience - Novice <i>All dogs will be on leash.</i>	<input type="checkbox"/> 9 – Showmanship Junior
<input type="checkbox"/> 2 – Obedience - Rookie Novice <i>Beginning handler and dog, on leash</i>	<input type="checkbox"/> 10 – Showmanship Novice Senior
<input type="checkbox"/> 3 – Obedience – Sub Novice A <i>First year exhibitor, first year dog, on leash</i>	<input type="checkbox"/> 11 – Showmanship Senior
<input type="checkbox"/> 4 – Obedience- Sub Novice B <i>Second year exhibitor / First year dog, on leash</i>	
<input type="checkbox"/> 5 – Novice A <i>First year off lead dog</i>	
<input type="checkbox"/> 6 – Novice B <i>Second year or higher off-lead dog</i>	

Fair Use Only	Check Number	Entry Fee Per Class	Number of Classes	
	Receipt Number	\$3.00 X		\$
			TOTAL DUE	\$

The undersigned states that:

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  - To his/her personal and actual knowledge, the statements regarding the same are true;
  - He/she has read and has full understanding of the rules and regulations governing the same and agrees to be governed by them; and
- He/she acknowledges to have read and agrees to uphold the Solano Fair Exhibitor Agreement.*

Exhibitor's Name Printed and Signature	Date
Parent's Name Printed and Signature	Date
Leader/Advisor Name Printed and Signature	Date

**SOLANO COUNTY FAIR ASSOCIATION  
FIRST AID PARENT PERMISSION FORM  
FOR LIVESTOCK EXHIBITORS**

Youth exhibiting livestock at the Solano County Fair is required to have the following form completed and signed by a parent/guardian. This First Aid Form must be submitted with your entry forms. This form must be on file before the exhibitor will be allowed on the fairgrounds with their animals. Parents/Guardians must file a "First Aid Parent Permission Form" for each exhibitor.

Exhibitors Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Of Chapter/Club/School: \_\_\_\_\_, has my permission to seek first aid treatment at the Solano County Fair First Aid Station during his/her stay. In my absence, it is understood that our leader/advisor or designated onsite person \_\_\_\_\_, who can be reached by calling their cell phone number \_\_\_\_\_  
Name of leader/advisor or designated person to be contacted Cell phone number

will be notified of any injury and will be promptly advised of what further medical treatment, if any, may be required.

Name of Emergency Contact Person, if parent cannot be reached: \_\_\_\_\_

Phone Number of Emergency Contact Person, if parent cannot be reached: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian name Printed \_\_\_\_\_ Emergency Contact Phone # \_\_\_\_\_

My child has had a Tetanus Toxoid Booster on this Date: \_\_\_\_\_

\_\_\_\_\_ My child has NO known allergies to medication or other product.

\_\_\_\_\_ My child IS ALLERGIC to the following medication(s)/product(s).  
\_\_\_\_\_

Other health concerns to be aware of: \_\_\_\_\_



*2020 Supreme Exhibitor*  
*Summary Record (Page 1 of 4)*

Exhibitor Name : \_\_\_\_\_

Club/Chapter: \_\_\_\_\_

Animal Specie Competing: \_\_\_\_\_

Number of Years in Project: \_\_\_\_\_

Please describe your 2020 project \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What was your most memorable learning experience with your project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe one important thing you learned from YQCA (Youth for the Quality Care of Animals) class:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What other projects/activities are you involved in: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Summary of 2020 Leadership experiences: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# 2020 Supreme Exhibitor

## Page 2 of 4

### **2020 Project Expenses:**

***Include both current expenses and estimate expenses through fair.***

Expense Item: Be Specific (i.e. Animal Purchase, Grain, Hay, etc.)

**Amount**

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-----	-----
-----	-----
-----	-----
-----	-----
-----	-----
-----	-----
-----	-----
-----	-----
-----	-----

**Total Expenses**

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### **2020 Project Income:**

***Include both current income and estimate income through fair.***

Expense Item: Be Specific (i.e. Animal Sales, Premiums, etc.)

**Amount**

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-----	-----
-----	-----
-----	-----

**Total Income**

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**Estimated 2020 Project Net Profit/Loss (Income minus Expenses)**

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## 2020 Supreme Exhibitor - Story

Page 3 of 4

Please write a Story about your 2020 project year. Minimum 250 words.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

## 2020 Supreme Exhibitor – Story

Page 4 of 4

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

## **DRUG RESIDUE POLICY** *(Please complete both sides of form)*

Please read carefully and sign. (Livestock will not be sold if not signed.).



In consideration of the Solano County Fair Association, hereinafter called the "Association," allowing \_\_\_\_\_, hereinafter referred to as "Owner," to participate in the Association's Junior Livestock Auction and sell Owner's animal(s), it is agreed that:

### **1. DRUG STATEMENT**

- a) Owner acknowledges that the Federal Food, Drug and Cosmetic Act prohibit the introduction or delivery into interstate commerce of any food that is adulterated or misbranded. Adulteration is defined in 21 USC Section 351 and includes any poisonous or deleterious substances, as well as new animal drugs defined as unsafe within the meaning of 21 USC Section 360b.
- b) No food animal may exceed FDA/EPA/USDA established tolerances for any foreign substances, including drugs, pesticides, feed additives or other chemicals. Owner acknowledges that none of his or her animals exceeds the established tolerances for foreign substances.
- c) Owner further acknowledges that any misrepresentation of a food animal that can potentially affect the acceptability of the carcass or milk will be considered fraud.
- d) If an animal has been administered a drug that is FDA approved for its species and class, sufficient time must have passed so that the animal does not test positive for that drug upon arrival at the Solano County Fair. Animals must remain free and clear of all drug and chemical residues while on Fairgrounds unless being treated by the fair Veterinarian or a licensed veterinarian while the Fair veterinarian is present.
- e) Prior to showing any animal, Owner must report the following information to management regarding any and all drugs or medications administered to an animal that might still be detected at time of showing: (1) the name of the drug, (2) the purpose of the drug, (3) the time and date of administration of the drug.
- f) It is the policy of the Solano County Fair that no animal which is entered for auction in the Solano County Fair shall contain any trace residues of any substance which is not approved by the Food and Drug Administration and/or the United States Department of Agriculture for slaughter animals, unless disclosed on the Medication Declaration Form.
- g) The showing of any animal that has been administered during its life any quantity of any unapproved drug, chemical or medication is strictly prohibited. Such drugs include, but are not limited to, any diuretic, unapproved growth simulant or other unapproved medication. Unapproved means not approved by the Food and Drug Administration (FDA) and/or U.S. Department of Agriculture (USDA) for slaughter animals including animals that may be designated for human consumption.
- h) It is the sole responsibility of the Exhibitor to insure that the animal is free of the above prescribed drugs and substances. Extent of knowledge on the part of the Exhibitor with regards to the drugs or substance found in an animal is not relevant to any issue, and it shall not be the defense that person or persons unknown introduced the proscribed substance into the animal prior to, or at arrival, or after arrival on the Solano County Fairgrounds property.
- i) Only animals with a declared medication waiting period **not to exceed 10 days** from closing date of the fair will be eligible to sell in the Junior Livestock auction. Animals with a declared medication waiting period in excess of 10 days from closing date of fair will be eligible to participate in showmanship and market classes, but will NOT be eligible for Champion awards or sell in the Junior Livestock auction. Any medical waiting period will be disclosed to potential buyers prior to sale of the animal at the Junior Livestock auction.
- j) If an animal has been administered any drug that requires a waiting period prior to processing, the animal will be held from processing for the specified time period. The time period that the animal will be held is based on the type of drug administered to the animal, but **may not exceed the 10 days stated above**.
- k) The Association reserves the right to test any animal officially entered in any division at any time without notice for foreign substance including, but not limited to drugs, chemicals or feed additives as well as DNA testing.
- l) Owner is responsible for all costs and damages associated with animals that are rejected at the processing center due to the presence of drug residues, or if substance is detected as part of random testing conducted by the Fair.
- m) Owner is responsible for any fees incurred by the processor in caring for an animal that has been administered drugs during the specified waiting period. If the processor refuses care of the animal during the specified waiting period, the Owner must care for the animal and make the appropriate arrangements with the buyer and the processor.
- n) Animals testing positive to an unapproved foreign substance including but not limited to drugs, chemicals, or feed additives, will be disqualified and forfeit all awards, premium money or sale proceeds. The live market animal or carcass that tests positive will immediately become the property of the Association and the exhibitor may be compensated for the market value, less expenses, if the animal passes inspection. Carcass of disqualified animal will be disposed of per instructions by CAHFS if disposed of before entering the food chain or by written instructions from USDA or FDA if already in the food chain.

- o) If an entry is disqualified, the entry and/or the exhibitor will be declared ineligible and will not receive awards, premiums and/or any sale proceeds, further the exhibitor will be responsible for payment of all fees (including attorneys' fees), fines, and costs incurred by the Solano County Fair Association. The owner/exhibitor and members of his/her immediate family may not be eligible to compete in subsequent Solano County Fair programs. The extent and degree of future eligibility shall be determined by Fair management.

## 2. INDEMNITY

The owner agrees, for him/herself and his/her heirs, executors, administrators, or assigns to indemnify and hold harmless, the Association, the County of Solano, the State of California, and each entity's respective officers, agents, and employees from any and all losses, claims, actions, or proceedings of any kind which may be initiated by purchasers, handlers or consumers of Owner's animal(s) and/or any other person or organization; including reimbursement for all legal costs and attorney fees incurred by the indemnified parties or any of them, for defense of any such actions which may hereafter impact directly or indirectly from the sale, handling and human consumption of Owner's animal(s).

I certify that my animal was born and raised in the United States. (Please Check One) YES \_\_\_\_\_ NO \_\_\_\_\_

**I CONFIRM THE DECLARATION OF MEDICATION INFORMATION COMPLETED BELOW TO BE CORRECT. I HAVE READ THIS AGREEMENT AND POLICY CAREFULLY AND FULLY, AND I UNDERSTAND ITS CONTENT AND SIGN IT OF MY OWN FREE WILL.**

DATED \_\_\_\_\_ Print Name \_\_\_\_\_ SIGNATURE \_\_\_\_\_  
(Owner)

DATED \_\_\_\_\_ Print Name \_\_\_\_\_ SIGNATURE \_\_\_\_\_  
(Parent or Legal Guardian)

## **DECLARATION OF MEDICATION FORM** (Please complete both sides of form) Complete one form for EACH market animal

**SPECIE** \_\_\_\_\_ **ANIMAL IDENTIFICATION #** \_\_\_\_\_ (Ear Tag, Tattoo or Leg Band)

Exhibitor Name: \_\_\_\_\_ Exhibitor Address: \_\_\_\_\_

### **INITIAL BOXES AND COMPLETE ALL SECTIONS THAT APPLY**

☐

I certify the above named animal **HAS NOT** been treated with prescription drugs and/or over the counter drugs.

☐

I certify the above named animal **HAS** been treated with an over the counter drug for which the withdrawal period **HAS** been completed.

Condition being treated: \_\_\_\_\_

Medication dispensed: \_\_\_\_\_ Dose Given \_\_\_\_\_

Dates of treatment: \_\_\_\_\_ Labeled withdrawal time: \_\_\_\_\_

☐

I certify the above named animal **HAS** been appropriately treated by a licensed veterinary practitioner with a medication as indicated below.

Condition being treated: \_\_\_\_\_

Medication dispensed: \_\_\_\_\_ Dose Given \_\_\_\_\_

Dates of treatment: \_\_\_\_\_ Instructed withdrawal time: \_\_\_\_\_

Veterinarian: \_\_\_\_\_ Veterinarian Phone: \_\_\_\_\_

Signature of licensed veterinarian providing care: \_\_\_\_\_

# **RV TRAILER APPLICATION FOR LIVESTOCK EXHIBITORS**

All RV trailer spaces will be assigned by Fair staff. Requests for specific spaces will be considered, but not guaranteed

Exhibitor's Name

Space Number (Assigned by Fair):

Address

Home Phone

City, State, ZIP

Cell Phone

Adult Chaperone

Email

Year

Make

Model

Length

RV License Number

Insurance Carrier

Policy Number

RV Style ☐ Pull Trailer ☐ 5<sup>th</sup> Wheel ☐ Motor Home

Slide Out ☐ Yes ☐ No

Prefer Sewer Service? ☐ Yes ☐ No

Special Requests *(Special requests will be considered, but not guaranteed.)*

FEES: ☐ \$175 for duration  
of fair

Please submit completed application and appropriate fees to:  
Solano County Fair Exhibits Office  
900 Fairgrounds Drive  
Vallejo, CA 94589

The signature below, of the adult chaperone, acknowledges that they have read and agree to abide by, the Trailer Space Rules as outlined in the Local Rules of the 2019 Solano Fair Entry Guidebook.

Signature

Print Name

Date

## LIVESTOCK TRAILER SPACE RULES

1. Due to high demand for livestock exhibitor trailer spaces, only one space per family is permitted.
2. Appropriate fees are required to reserve spaces. Spaces will not be reserved until fee has been paid.
3. No reservations will be taken without a completed entry form and payment in full for entries and trailer space fees.
4. All space reservations will be accepted on a first-come, first-served basis. All RV trailer spaces will be assigned by Fair staff. Requests for specific spaces will be considered, but not guaranteed. If space fills up, a waiting list will be established but with no guarantee of space. The size of the trailer must be provided in order to reserve space. Oversized trailers may not be accommodated.
5. Due to trailer space size limitations use of pop-outs may be prohibited.
6. Upon receiving the reservation and fee, a reservation confirmation form will be sent to you.
7. Trailers will not be pulled in prior to the date identified on the reservation confirmation form. Trailers must remain stationary for the duration of the exhibitor's stay. All trailers must be removed by date and time identified on the reservation confirmation form.
8. The Fair reserves the right to take any and all appropriate action to evict trailers or vehicles which are not removed by the deadlines specified on the reservation confirmation form. All costs associated with evictions from the trailer area will be the responsibility of the registered owner of the trailer or vehicle.
9. One responsible chaperone (parent or leader at least 25 years of age) is required per trailer. Siblings are not considered chaperones no matter the age. No Junior exhibitor, even if 18 or over, can stay without a chaperone.
10. An adult leader or parent with trailer will be required to sign the RV Trailer Application acknowledging they have read these rules and agree to abide by them. The adult signature on the application may be held responsible for the conduct of all residents of their trailer.
11. Only registered chaperones, leaders / advisors, exhibitors and siblings are allowed to camp in the trailer area. No more than five exhibitors are allowed per trailer.
12. Identification cards provided by Fair management must be completed and visibly posted on all trailers.
13. No contained fires or BBQs will be allowed after 11 pm. Absolutely no open fires are allowed.
14. No waste-water buckets may be used.
15. No noise after 11 pm.
16. No dogs are allowed at the Fair except for service dogs. RV Park residents are allowed to camp with their dogs if they register each animal at the Livestock Office and abide by the following rules:
  - a) Dogs must not be mean or vicious.
  - b) Dogs may not be tied out, but may be housed inside an appropriate dog enclosure within dog owner's RV space.
  - c) Dogs must always be on leash during walks and owners must clean up after their dogs.
  - d) Dogs are restricted to the RV Park area only. Dogs are not allowed in the barns or on the main concourse. Owners found in violation of rules will have their dog removed from the grounds and will forfeit their deposit.
  - e) In order to register their dog with the Livestock Office, dog owner must complete an official registration form and pay a \$50 registration fee. Dog owner will be required to provide a \$50 refundable deposit, license information, current rabies certificate and proof of liability insurance.
  - f) Service dogs are exempt from the registration requirement.
17. There is no guarantee of electricity, sewer or water in the spaces.
18. Illegal use of illicit drugs or illegal use of alcohol by exhibitors, parents, chaperones, leaders or advisors will not be tolerated.
19. No firearms or weapons are permitted on the Fairgrounds. Fair management reserves the right to determine what is considered a weapon.
20. There will be Security patrol after 11 pm. Any violation of rules by exhibitors, family or guests will be referred to Fair management for appropriate action.
21. Violation of rules or Fair policies is grounds for loss of trailer spaces.
22. Minor violations of the rules will result in the following consequences:
  - a) Verbal warning
  - b) Written citation
  - c) Removal of trailer from fairgrounds
23. Serious violations of above rules (i.e. use of alcohol or drugs, physical violence, or possession and/or use of firearms or other weapons) will result in immediate ejection from the Fairgrounds, loss of privilege to sell in the Junior Livestock Auction, entries removed from Fairgrounds, and loss of premiums.