

**POLK COUNTY YOUTH FAIR**  
mailing address - P O BOX 9005, DRAWER HS03, BARTOW FL 33831-9005  
street address - 1702 Highway 17 South, Bartow, FL 33830  
(863) 519-8677, ext. 116

**WHIP POPPING ENTRY FORM**  
**ENTRY DEADLINE - TUESDAY, JANUARY 19, 2010**

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**PRINT OR TYPE ALL INFORMATION ON ENTRY FORM! USE BLACK OR BLUE INK ONLY**

Student School ID # \_\_\_\_\_ Your age as of September 1, 2009: \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Telephone Number \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/Town \_\_\_\_\_ Zip Code \_\_\_\_\_

Club/Chapter Name \_\_\_\_\_

School Attending \_\_\_\_\_ Grade in School \_\_\_\_\_

Are you exhibiting as a (please check one):  4-H member  FFA member  FCCLA member

**T-Shirt Size (please check one):**  Small  Medium  Large  X-Large

I certify I am a member in good standing of the organization listed above. **I HAVE READ AND UNDERSTAND THE 2010 YOUTH FAIR RULES AND REGULATIONS AND AGREE TO ABIDE BY SAID RULES.** I hereby affirm that all statements on this entry are true and correct.

Exhibitor's Signature \_\_\_\_\_ Date \_\_\_\_\_

I certify that I have complete knowledge of this entry and authorize my child to enter these activities. **I HAVE READ AND UNDERSTAND THE 2010 YOUTH FAIR RULES AND REGULATIONS AND AGREE TO ABIDE BY SAID RULES.**

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

I certify that the above named exhibitor is a member in good standing of the organization listed above.

Teacher/Leader Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*All signatures are mandatory for entry form to be valid.**

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