



Fowlerville Youth Show Dog Declaration Project Form

Due: May 1st

Only this exhibitor/animal combination will be eligible to show at the Fowlerville Fair

Exhibitor Information

Exhibitor Name: _____

Address: _____ City/State/Zip: _____

Phone: _____ Years in Project: _____

Birthdate: _____ Age: _____

Parent/Guardian Name: _____

Junior Ag Member: 4-H Club: _____ FFA Chapter: _____

Project Information

Dog's Name: _____ Breed: _____

Sex: _____ Age: _____

Photo of Dog:

Please be sure to attach a copy of your dog's vaccination certificate from a veterinarian showing shots (Rabies and DA2PPV+L2) are current through the week of fair.

I have read the above information and acknowledge it is correct.

Signature of Exhibitor: _____ Date: _____

Form must be turned into the Fowlerville Fair Office by May 1st.
8800 W. Grand River Ave. P.O. Box 372 Fowlerville, MI 48836
fair@fowlervillefamilyfair.com – (517)223-8186