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 form a veterinarian show 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., Fowlerville, MI 48836

fair@fowlervillefamilyfair.com – (517)223-8186

Updated 12-23-2025 TC