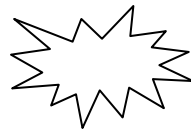


INITIAL WEIGH IN
SHEEP



COOL Papers Received _____

Premise ID # _____

2017
EAU CLAIRE COUNTY FAIR MEAT ANIMAL PROJECT

Name _____ Youth Organization _____

Address _____ Phone _____

City _____ Zip _____

Weigh Date: April 7, 2017 or April 8, 2017 (CIRCLE DATE WHEN WEIGH-IN WAS DONE!)

Number of animals weighed: _____

Other members with livestock at this premise: _____

ANIMAL INFORMATION

EAR TAG

RFID TAG

BEG WEIGHT

FAIR WEIGHT

Signature of Exhibitor or Parent/Guardian

Signature of Extension Agent, Agri-Science Instructor or other person weighing & identifying animals.

A \$5.00 weigh-in fee per animal must accompany this form.

For Office Use ONLY

Date Received _____

Weigh-In Payment Received _____