

SD Field Day - Winner SD June 8 & 9, 2018

Females							
Name of Heifer	B&O	Tattoo	AHA Registration #	Birthdate	Name of Sire & Dam	AHA Registration #s	Breeder
		RE: LE:			S: D:	S: D:	
		RE: LE:			S: D:	S: D:	
		RE: LE:			S: D:	S: D:	
		RE: LE:			S: D:	S: D:	

Cow/Calf							
Name of Cow	B&O	Cow Tattoo	Cow's Registration #	Cow's DOB	Sire of Calf	Sex & Calf DOB	Breeder
		RE: LE:			S: D:	Calf: Bull or Heifer Calf DOB:	
		RE: LE:			S: D:	Calf: Bull or Heifer Calf DOB:	

Bulls							
Name of Bull	B&O	Tattoo	AHA Registration #	Birthdate	Name of Sire & Dam	AHA Registration #s	Breeder
		RE: LE:			S: D:	S: D:	
		RE: LE:			S: D:	S: D:	

Steers							
Name of Steer	B&O	Tattoo	AHA Registration #	Birthdate	Name of Sire & Dam	AHA Registration #s	Breeder
		RE: LE:			S: D:	S: D:	
		RE: LE:			S: D:	S: D:	

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____
Age (as of Jan 1): _____ **Birthdate:** _____

Fitting Contest: Y / N Junior Nationals: Y / N Spotlight: Y / N

Entries _____ x \$20 = _____ **Postmark by May 25**
 # Entries _____ x \$30 = _____ **Postmark after May 25 or at Event**
 SDJHA Dues _____ x \$20 = _____
 T-shirt _____ x \$10 = _____ **Size** _____
Note: we are utilizing the same t-shirt as in 2017
Total = _____

I acknowledge that cattle can be unpredictable and my participation in the SD Hereford Field Day or South Dakota Summer Spotlight Show can cause potential death or serious injury of people or cattle, or property damage. **With full understanding of the potential risks, I hereby assume the risks of participating in the SD Hereford Field Day and the SD Summer Spotlight Show.**

I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns: a) **I waive, release and discharge** from any and all claims or liabilities for death or personal injury or damages of any kind which arise out of or relate to my participation in the SD Hereford Field Day or the SD Summer Spotlight Show, **the following persons or entities:** South Dakota Hereford Association, South Dakota Junior Hereford Association, and the officers, directors, employees, advisors, representatives and agents of any of the above; b) **I agree not to sue indemnify and hold harmless** the persons or entities mentioned above from any claims made or liabilities assessed against them as a result of my actions.

I hereby agree to follow the rules, regulations, and decisions set by the South Dakota Junior Hereford Association.

Make Checks Payable to: SDJHA
Send Entries to: Jeanne Johnson, 46473 289th St, Centerville SD 57014

x _____
Exhibitor Signature

x _____
Parent/Legal Guardian