

LINDSAY EXHIBITIONPoultry, Rabbit & Cavy Show

Entries Due: Wednesday, September 6, 2023

PREMISES ID: 0N4206355

Office Use Only	
xhibitor #:	
ate:	

ONE ENTRY PER EXHIBITOR

	DITOR						
Exhibitor Name:							
Owner/Farm Na	me:						
Address:		City:		Province:	Po	Postal Code:	
Phone:		·	Email:		·		
Insurance Co. Na	ame:		Policy #:		E×	piry:	
Prize Cheque Pa	yable to:	Exhibitor () Farm ()	Insurance Amount (m	nin. 2 millior	n):	
Division & Class - A, B, C, or D		Description of Bird (use wording of prize list, one per line)				Entry Fee	
						Total Entry Fees	
						Admin Fees	\$10.00
Having in my possession, the rules and regulations of the Lindsay Exh				on (LEX) livestock		TOTAL OWING	
exhibitor code of corequirements assorand make this entranders the Linds	onduct, concussion code of ciated with the show, I (we) y subject thereto at my (ou ay Agricultural Society or LI ms. I (we) agree to allow ph	conduct, and agree to abide r) own risk. I (v EX, its membe	any other rule e by these rule ve) shall inden rs, agents, and	es, policies, and es and regulations nnify and hold d employees from	Chq Cash Debi Cred	t [] Come into the LEX office during	edit payment

Division & Section	Class - A, B, C, or D	Description of Bird (use wording of prize list, one per li	ne) Entry Fe
		Please complete Total Fees on the other side.	TOTAL \$