**POULTRY Market Animal Drug History Form**

**SPECIES LEG BAND #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ POULTRY #1**

I hereby certify that this animal has not received, or been treated with drugs, tranquilizers, diuretics, steroids, antibiotics, or other substances, without following current withdrawal procedures.

***Products and Dates Administered to Animal:***

Exhibitor’s Name **(printed)**:

Date:

Signature of Parent/Guardian:

Address, City & Zip:

Phone Number:

***THIS COMPLETED FORM MUST BE TURNED IN AT FINAL WEIGH-IN***

**POULTRY Market Animal Drug History Form**

**SPECIES LEG BAND #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ POULTRY #2**

I hereby certify that this animal has not received, or been treated with drugs, tranquilizers, diuretics, steroids, antibiotics, or other substances, without following current withdrawal procedures.

***Products and Dates Administered to Animal:***

Exhibitor’s Name **(printed)**:

Date:

Signature of Parent/Guardian:

Address, City & Zip:

Phone Number:

***THIS COMPLETED FORM MUST BE TURNED IN AT FINAL WEIGH-IN***