

CLARK COUNTY 4-H / FFA MARKET ANIMAL WEIGH-IN FORM / POULTRY

Location of Weigh-In _____ Date _____
Participant's Name _____
Date of Birth _____ Grade _____ Phone _____
Address & City _____
4-H Club / FFA Chapter _____
Parent/Guardian _____ Premises ID (housed at) _____

1. Wing _____ Band # _____ Weight _____
Floater Yes ____ No ____

2. Wing _____ Band # _____ Weight _____
Floater Yes ____ No ____

3. Wing _____ Band # _____ Weight _____
Floater Yes ____ No ____

4. Wing _____ Band # _____ Weight _____
Floater Yes ____ No ____

5. Wing _____ Band # _____ Weight _____
Floater Yes ____ No ____

6. Wing _____ Band # _____ Weight _____
Floater Yes ____ No ____

7. Wing _____ Band # _____ Weight _____
Floater Yes ____ No ____

8. Wing _____ Band # _____ Weight _____
Floater Yes ____ No ____

9. Wing _____ Band # _____ Weight _____
Floater Yes ____ No ____

10. Wing _____ Band # _____ Weight _____
Floater Yes ____ No ____

I have reviewed the Livestock Show and Sale Rules (available from VoAg/FFA Advisor or the UW-Extension Office) and I am aware that I am required to attend two (2) of the educational sessions offered or I will be dropped from the sale program.

Participant's Signature _____

Weigh-In Supervisor's Signature _____