**Poultry Market Animal Drug History Form**

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

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**

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

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**