2026 WILSON COUNTY JUNIOR LIVESTOCK SHOW ENTRY FORM

EXHIBITOR INFORMATION	(PLEASE PRINT	SHIRT SIZE						
EXHIBITOR NAME								
MAILING ADDRESS.								
PHYSICAL ADDRESS (No PO Boxes								
AGE (As of Jan 2026)								
PHONE#_								
SCHOOL			_ GRADE					
PRINCIPAL			— FFA/4-HCLUB					
	SHOV	V INFO	RMATION					
<u>MARKET</u>	#ENTRIES	TOTAL	BREEDING*	#ENTRIES	TOTAL			
Steer(s)@\$35			Beef Heifer(s) @ \$35					
Lamb(s) @\$35			Breeding Gilt(s) @ \$35					
Swine@\$35			_ Breeding Goat(s) @ \$35					
Goat(s)@\$35			_ Breeding Sheep(s) @ \$35					
Broiler(s)@\$35								
Turkey(s)@ \$35			_ Breeding Bull(s) @ \$35					
Meat Pen Rabbit(s)@ \$35/Pen			_					
Fryer Rabbit(s) @ \$35 (limit 2) —		-	=					
OTHER Ag Mechanics @ \$35	#ENTRIES		-					
Commercial Wether Doe @ \$35 _			TOTAL MARKET ENTRIES					
Commercial Wether Ewes @\$35								
Commercial Heifer @ \$35/pen	-		TOTAL OTHER ENTRIES	-				
	-		TOTAL OTHER ENTRIES TOTAL ENTRIES (\$)	-				
*Must Complete Breeding Animal	Information							
For entry into and participation in the and agree to enter into the RELEASI ETHICS POLICY FORM.								
We, the undersigned Exhibitor and p of the Wilson County Livestock Sho				by all rules and	regulations			
Owner / Exhibitor			Parent / Guardian					
I certify that the above Owner/Exhibitor to be shown in accordance with the rules				so certify that the	entry is eligible			
County Extension Agent/ Agricultural Science Teacher			Name of Club / Chapter					

ACKNOWLEDGMENT OF RISKS: The undersigned recognize and understand there are risks associated with entry into and participation in the Wilson County Junior Livestock Show(WCJLS) including, but not limited to, bodily injury or death, and damage to property or privacy rights, The undersigned further acknowledge that they will be liable for all damage to persons, livestock, or property that is caused by them or any persons (including, but not limited to, minors) under their care and control, and that arise out of, or are related to, the undersigned's entry into and participation in the WCJLS. UNDER CHAPTER 87, TEXAS CIVIL PRACTICE AND REMEDIES CODE, A LIVESTOCK SHOW SPONSOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN A LIVESTOCK SHOW RESULTING FROM THE INHERENT RISKS OF LIVESTOCK SHOW ACTIVITIES.

RELEASE FROM LIABILITY: - We, the Exhibitors of the Wilson County Junior Livestock Show and parent/guardians, hereby RELEASE, ACQUITS AND FOREVER DISCHARGES, AND WAIVES any and all claims against the Wilson County Livestock Show Association (WCLSA), its directors, volunteers, agents, and employees (Released Parties) that arise from or relate to their entry and participation in the WCJLS - Including but not limited to NEGLIGENCE (WHETHER SOLE, JOINT OR CONCURRENT) GROSS NEGLIGENCE, NEGLIGENCE PER SE AND/OR STRICT LIABILITY and agree not to sue any

of the Release Parties for such Claims. Without limiting the foregoing, the undersigned agrees that the Released Parties shall not be liable to them, their family, or their guests, for personal injury, property damage, or any other Claims arising from or related to the undersigned s entry into and participation in the WCJLS.

PHOTOGRAPH/INTERVIEW RELEASE AND INDEMNITY AGREEMENT: - The undersigned GRANTS PERMISSION to be PHOTOGRAPHED or INTERVIEWED in connection with the WCJLS. The undersigned understands that any such photograph or interview may be used by the RELEASED PARTIES or television, film, video, visual, graphic, or printed media. The undersigned agrees to RELEASE and INDEMNIFY the Released Parties with respect to any Claims related to the usage of such photographs or interviews by the released parties or the media.

DRUG CERTIFICATION: -We, the Exhibitors and parents/guardians, certify that we have not administered to this market entry, nor has it received, to the best of our knowledge, any substance not approved by the Food and Drug Administration (FDA) and/or the United States Department of Agriculture (USDA) for slaughter animals. This entry is not, nor will it be, within any withdrawal time relative to the administration of any drug, chemical or feed additive approved by FDA or USDA by the time the animal is officially weighed in by the WCJLS.

The WCLSA reserves the right to condemn and/or disqualify any animal live or slaughtered, found in violation of the use of drugs, chemicals, or feed additives and the exhibitor will forfeit all auction sale and/or premium money if the animal is disqualified.

ETHICS POLICY - The undersigned recognize and understand that The Wilson County Junior Livestock Show conforms to the TEXAS 4-H/FFA LIVESTOCK PROGRAM ETHICS POLICY. Injections under the skin or into the flesh or application of any substance per rectum is prohibited at the Wilson County Junior Livestock Show unless under the direct supervision of a licensed veterinarian. Any individual that is caught injecting an animal is subject to having the animal and the exhibitor of that animal disqualified from the show.

COOPERATION AGREEMENT - When called upon, the Wilson County Junior Livestock Show participates with area livestock shows regarding the eligibility of exhibitors. The WCJLS will release, if asked and at its discretion, names of exhibitors and animal validation numbers that have participated at the WCJLS. The WCJLS will not release any personal information of its exhibitors.

For entry into and participation in the Wilson County Junior Livestock Show, the undersigned hereby attest to

have read the		C		•	_						LIABILITY	AND
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Owner / Ex	hibitor			_			Par	ent /	Gu	ardian		

2026 WILSON COUNTY JUNIOR LIVESTOCK SHOW

BREEDING SUPPLEMENTAL ENTRY INFORMATION CARD

EXHIBITOR NAME			FFA/4-HCLUB							
BREEDING ANIM	<u>[ALS</u>									
SPECIES(C!RCLEONE)	HEIFER	GILT	GOAT SHEEP							
NAME			BREED							
DATE OF BIRTH		REGISTRY# _								
BREEDING GOAT										
(CIRCLE WHAT APPLIES)	BUCK/DOE	AGE:	3 MOS - 1 YR. IYR-2YRS AGED FULL BLOOD PERCENT AG							
SPECIES(CIRCLEONE)	HEIFER	GILT	GOAT SHEEP							
NAME			BREED							
DATE OF BIRTH BREEDING GOAT										
(CIRCLE WHAT APPLIES)	BUCK/DOE	AGE:	3 MOS - 1 YR. IYR-2YRS AGED FULLBLOOD PERCENTAGE							
SPECIES(CIRCLE ONE)	HEIFER	GILT	GOAT SHEEP							
NAME			BREED							
DATEOFBIRTH BREEDING GOAT		REGISTRY#	CLASS							
(CIRCLE WHAT APPLIES)	BUCK/DOE	AGE:	3MOS-I YR. IYR-2YRS, AGED FULLBLOOD PERCENTAGE							
SPECIES (CIRCLE ONE)	HEIFER	GILT	GOAT SHEEP							
NAME			BREED							
DATEOFBIRTH		REGISTRY#	CLASS							
BREEDING GOAT (CIRCLE WHAT APPLIES)	BUCK/DOE	AGE:	3MOS-1 YR. IYR-2YRS, AGED FULLBLOOD PERCENTAGE							

2026 WILSON COUNTY JUNIOR LIVESTOCK SHOW

RABBIT BREEDING SUPPLEMENTAL ENTRY INFORMATION CARD

EXHIBITOR NAME			FFA/4-HCLUB								
THE BREEDING ENTRY INFORMATION MUST BE COMPLETED. BREEDING/HORSE ENTRIES RECEIVED WITHOUT THIS INFORMATION WILL NOT BE ACCEPTED. SEE GENERAL RULE 3											
BREEDING RABBITS (NOT TO INCLUDE MEAT PEN RABBITS OR FRYER RABBITS)											
BREED(CIRCLEBREED)	American Standard Chinchilla		American Fuzzy Lop	Californian	an Champagne						
D'Argent	Creme D1 Argent	Dutch	DwarfHotot	Eng	glish Lop	English					
Spots Florida Whites	French Lop	Havana	Himalayan	Но	lland Lop	Jersey					
Wooly Mini Lop	Mini Rex	Netherland Dwarf	New Zealand	Pol	ish	Rex					
Satin	Silver Martens	Tans	Other								



Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Befor	е у	bu begin. For guidance related to the purpose of Form W-9, see <i>Purpose of Form</i> , below.				-									
	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the o entity's name on line 2.)	wner's na	ıme on liı	ne 1, an	d enter th	e bus	iness/di	sregarded						
	2	2 Business name/disregarded entity name, if different from above.													
Print or type. See Specific Instructions on page 3.		Check the appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes. Individual/sole proprietor C corporation S corporation Partnership LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check box for the tax classification of its owner. Other (see instructions)	Exe Con	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)											
Specif	30	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax and you are providing this form to a partnership, trust, or estate in which you have an ownership ithis box if you have any foreign partners, owners, or beneficiaries. See instructions		(Applies to accounts maintained outside the United States.)											
See	5	Address (number, street, and apt. or suite no.). See instructions.	e and a	ddress (o	ptiona	ıl)									
	6	City, state, and ZIP code													
	7	List account number(s) here (optional)													
Par	tΙ	Taxpayer Identification Number (TIN)													
Enter	VOL	r TIN in the appropriate box. The TIN provided must match the name given on line 1 to av	oid	Social	security	number									
backı reside	ip w ent a	withholding. For individuals, this is generally your social security number (SSN). However, for alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other this your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>	ora	or	_		_								
TIN, la	ater	•	,		er iden	tification	numl	ner							
		ne account is in more than one name, see the instructions for line 1. See also What Name of Give the Requester for guidelines on whose number to enter.	and		-										
Par	t II	Certification	· ·												
Unde	, be	nalties of perjury, I certify that:													
1. The	nu	mber shown on this form is my correct taxpayer identification number (or I am waiting for	a numbe	r to be	issued	to me);	and								
Ser	vice	of subject to backup withholding because (a) I am exempt from backup withholding, or (b) e (IRS) that I am subject to backup withholding as a result of a failure to report all interest of ger subject to backup withholding; and													
3. I ar	n a	U.S. citizen or other U.S. person (defined below); and													
4. The	FΑ	TCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reportin	g is corr	ect.											

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

General Instructions

Signature of

U.S. person

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

What's New

Sign

Here

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

Date