

4-H AND FFA DOG SHOW



MISSOURI STATE FAIR ENTRIES
2503 W. 16TH ST., SEDALIA, MO 65301
FAX: (660) 827-8169
EMAIL: ENTRIES@MDA.MO.GOV

Monday, August 11, 2025 Mathewson Exhibition Center
ENTRY MUST BE RECEIVED BY JULY 7, 2025 AT 5:00 PM

SOCIAL SECURITY NUMBER		MEMBER'S 4-H AGE (AS OF JANUARY 1 OF CURRENT YEAR)		TITLE (CHECK ONE) <input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MISS <input type="checkbox"/> MS.	
EXHIBITOR'S NAME			DATE OF BIRTH	MEMBERSHIP <input type="checkbox"/> 4-H MEMBER <input type="checkbox"/> FFA MEMBER	
ADDRESS			CITY		STATE ZIP CODE
COUNTY NAME		DAYTIME TELEPHONE		*E-MAIL ADDRESS	
EXHIBITOR'S SIGNATURE			DATE (MM/DD/YYYY)		YEARS IN DOG CARE

Please accept these entries subject to the rules and regulations as carried in the 2025 Missouri State Fair online premium guide by which I agree to be governed, and I further declare that all statements made in connection with said entries are true. By signing this entry form, I agree to abide by the photograph release. *By providing your e-mail address you are giving MSF permission to send you information electronically.

MARK T-SHIRT SIZE
 Youth 14-16 Adult Medium Adult Large Adult XL Adult XXL

CLASS NO.	DOG'S NAME (INCLUDING ANY AKC TITLES)	IF IN CLASS 13, 14, 15, 16 OR 19 (JUMP HEIGHT AND/OR WIDTH)	BREED

ENTRY FEE - \$4.00 PER CLASS	Number of classes entered	\$4.00
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ADMISSION SPECIALS (Check our website for daily admission specials. www.mostatefair.com/gate-admission)
DISCOUNT ADMISSION (13 & OLDER) – LIMIT 40 TICKETS PER EXHIBITOR

	QTY.	PRICE	TOTAL
ADULT DAILY ADMISSION		\$8.00	
		PROCESSING FEE	\$2.00
AMOUNT ENCLOSED			

PAYMENT INFORMATION*

CREDIT CARD (CHECK ONE) <input type="checkbox"/> M/C <input type="checkbox"/> VISA <input type="checkbox"/> DISCOVER <input type="checkbox"/> AM EX		NUMBER	SECURITY CODE	EXPIRATION DATE (MM/YY)
SIGNATURE		PRINT SIGNATURE NAME		ZIP CODE

This is to certify that the above member is enrolled in 4-H dog care in _____ County. With the approval of the project leader, and if a qualifying score was not achieved in last year's class, this individual may remain in the same obedience class as last year. If approval of the project leader is not given, the individual must move up in obedience levels as indicated in the rules.

APPROVED (PROJECT LEADER)	APPROVED (YOUTH SPECIALIST/YOUTH EDUCATOR)	FFA CHAPTER #
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Reminder: Vaccinations and general health must be verified with a health certificate from a veterinarian. These will be collected. NO PAPERS - NO SHOW!

DOG CLASSES - JUNIOR SHOWMANSHIP

1 Junior Showmanship, 8-10 years, Novice* 9 6 3	7 Beginner-Novice (1st Year Dog), 11-13 years 9 6 3
2 Junior Showmanship, 11 years and over, Novice* 9 6 3	8 Beginner-Novice (1st Year Dog), 14 years and over 9 6 3
3 Junior Showmanship, 9-12 years, Open** 9 6 3	9 Novice members 12 years & under 9 6 3
4 Junior Showmanship, 13-14 years, Open** 9 6 3	10 Novice members 13 yrs & over 9 6 3
5 Junior Showmanship, 15 years and over, Open** 9 6 3	11 Graduate Novice 9 6 3
	12 Open 9 6 3
	13 Utility 9 6 3
	14 Rally Novice 1st year 9 6 3
	15 Rally Novice, 8-12 years 9 6 3
	16 Rally Novice, 13 years and over 9 6 3
	17 Rally Intermediate 9 6 3
	18 Rally Advanced 9 6 3
	19 Rally Excellent 9 6 3
	20 Junior Dog Bowl Participant (8-11 years) 9 6 3
	20 Senior Dog Bowl Participant (12 years & over) 9 6 3
6 Beginner-Novice (1st Year Dog), 8-10 years 9 6 3	"Ages on Dog Bowl subject to change based on number of entries."

*NOVICE: 4-H or FFA members competing in the Missouri State Fair Dog Show for the first year.

**OPEN: 4-H or FFA members who have competed one or more years in the Missouri State Fair Dog Show.

Plaque: Best Junior Handler - Novice
 Best Junior Handler - Open



Vendor Input Instructions

To claim Missouri State Fair premiums won in conjunction with entries, you are required to provide the following information on the Vendor Input Form:

- **Exhibitor's name and Social Security Number, as shown on social security card**
- **Exhibitor's valid mailing address**
- **Exhibitor's valid telephone number**
- **Two signatures (at black "X" and at bottom of form)**

Forms must be returned to the Missouri State Fair with your entries to:

Mail: Missouri State Fair Entries
2503 W. 16th St.
Sedalia, MO 65301

E-mail: entries@mda.mo.gov

Fax: (660) 827-8169 or (660) 827-8160

Please make sure information is provided for the EXHIBITOR, and not for a parent or guardian.

To receive your premium payment via direct deposit into your bank account, please take the form to your bank and have a representative complete the section "TO BE COMPLETED BY FINANCIAL INSTITUTION". If this information is left blank, a paper check will be mailed.

Premiums not claimed by the end of the calendar year will be forfeited, per Missouri State Fair rules and regulations.



STATE OF MISSOURI
OFFICE OF ADMINISTRATION
SUPPLIER INPUT/ACH-EFT APPLICATION

State Fair 2025

Suppliers will need to visit www.MissouriBUYS.mo.gov to complete the Self-Service Registration.

***Required Fields**

*NAME	*AS SHOWN ON FEDERAL TAX RETURN	*FEIN	*SSN	
*ADDRESS	*TAX ORGANIZATION TYPE INDIVIDUAL/SOLE PROPRIETORSHIP OR SINGLE-MEMBER LLC LIMITED LIABILITY COMPANY – C CORPORATION LIMITED LIABILITY COMPANY - PARTNERSHIP LIMITED LIABILITY COMPANY – S CORPORATION OTHER: FEDERAL TAX EXEMPT/NON-PROFIT OTHER: GOVERNMENT ENTITY BENEFIT CORPORATION (B CORP) TRUST/ESTATE C CORPORATION FOREIGN S CORPORATION STATE EMPLOYEE PARTNERSHIP			
*EMAIL				
NAME				REMIT TO IF DIFFERENT THAN ABOVE
ADDRESS				
EMAIL				
COMMENTS				
DATE OF CHANGE				
PREVIOUS TAXPAYER ID				
PREVIOUS NAME				
PREVIOUS ADDRESS				
HAVE YOU OR AN IMMEDIATE FAMILY MEMBER EVER SERVED IN THE U.S. ARMED FORCES?		YES	NO	
IF YES, WOULD YOU LIKE INFORMATION ABOUT MILITARY-RELATED SERVICES IN MISSOURI?		YES	NO	
IF YOU ANSWERED YES ABOVE, MAY WE SHARE YOUR CONTACT INFORMATION WITH THE MISSOURI VETERANS COMMISSION IN ORDER TO PROVIDE YOU WITH INFORMATION REGARDING AVAILABLE VETERANS BENEFITS AND SERVICES?		YES	NO	
GENERAL INFORMATION MAY ALSO BE FOUND ON THE MISSOURI VETERANS COMMISSION'S WEBSITE.				
TO BE COMPLETED BY FINANCIAL INSTITUTION				
NAME/ADDRESS OF FINANCIAL INSTITUTION				
DEPOSITOR ROUTING NUMBER				
DEPOSITOR ACCOUNT NUMBER				
NAME ON ACCOUNT				
TYPE OF ACCOUNT		CHECKING	SAVINGS	
SIGNATURE OF REPRESENTATIVE OF FINANCIAL INSTITUTION				
PRINT NAME		TITLE		
TELEPHONE NUMBER		DATE		
<p>I (We) hereby authorize the State of Missouri, to initiate credit entries to my (our) account at the depository financial institution named and to credit the same such account. I (We) acknowledge that the origination of ACH transactions to my (our) account must comply with the provision of U.S. law.</p> <p>This authorization is to remain in full force and effect until the State of Missouri, Office of Administration, has received written notification from me (us) of its termination in such time and in such manner as to afford the State of Missouri and the financial institution a reasonable opportunity to act on it.</p> <p>I (We) hereby cancel my (our) ACH/EFT authorization.</p>				
*SUPPLIER SIGNATURE				
*PRINT SUPPLIER CONTACT NAME		*TITLE		
SUPPLIER CONTACT EMAIL ADDRESS				
*SUPPLIER CONTACT TELEPHONE NUMBER		*DATE		
CERTIFICATION FOR INTERNAL REVENUE SERVICE (IRS) Exempt from Backup Withholding Under penalties of perjury, I certify that: I. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and II. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and III. I am a U.S. person (including a U.S. resident alien). Certification instructions. You must cross out item II 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 all real estate transactions, item II 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 W-9 Instructions on irs.gov website for more information.) The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.				
SIGNATURE				