

USE THIS FORM FOR ALL SENIOR AGRICULTRUAL EXHIBIT HALL ENTRIES

Hickory American Legion Fair
Mail to: PO Box 1844, Hickory NC 28603

Date: _____ 20_____ Name: _____ Phone: _____

Address: _____ City, Sate, Zip Code: _____

Please accept the following entries for the Hickory American Legion Fair subject to the rules governing same in the Premium List.
The Association assumes no responsibility in case of loss or damage to stock or other exhibits from any cause and upon this condition only are entries received. The exhibitor agrees to hold the fair association harmless of all liabilities.

NOTE: WE RESERVE THE RIGHT TO ACCEPT AND REJECT ANY ENTRY

DEPT. LETTER	CLASS NUMBER	DESCRIPTION OF ARTICLE AND VARIETY (USE EXACT WORDING AS IN PREMIUM LIST)

PLEASE READ CAREFULLY THROUGH ALL DATES AND DIRECTIONS AND FOLLOW THEM.
ENTRY FORMS MAILED EARLY ENOUGH WILL HAVE ENTRY TICKETS MAILED BACK, IF WE RECEIVE THEM IN TIME

EXHIBITOR ENTRY STATEMENT

I have read and understand, consent to, and agree to abide by the IAFE (International Association of Fairs and Expositions) as stated in the Premium List of events. A separate copy may be obtained on request from show organizer.

(Owner, exhibitor)

Date

USE THIS FORM FOR ALL JUNIOR AGRICULTURAL EXHIBIT HALL ENTRIES

Hickory American Legion Fair
Mail to: PO Box 1844, Hickory NC 28603

Exhibitor's Number

Date: _____ 20 ____ Name: _____ Age: _____ Phone: _____

Address: _____ City, State, Zip Code: _____

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All Entries Must Be Made In The Name Of the Bona Fide Owner

DEPT. LETTER	CLASS NUMBER	DESCRIPTION OF ARTICLE AND VARIETY (USE EXACT WORDING AS IN PREMIUM LIST)

PLEASE READ CAREFULLY THROUGH ALL DATES AND DIRECTIONS AND FOLLOW THEM.
ENTRY FORMS MAILED EARLY ENOUGH WILL HAVE ENTRY TICKETS MAILED BACK, IF WE RECEIVE THEM IN TIME

EXHIBITOR ENTRY STATEMENT

I have read and understand, consent to, and agree to abide by the IAFE (International Association of Fairs and Expositions) Rules

(Owner, exhibitor)

Date

(Guardian or Parent of the Above Signature)

Date

Dept. Letter	Class Number	Description of Article and Variety (Use Exact Wording as in Premium Book)

LIVESTOCK OFFICIAL ENTRY BLANK

Hickory American Legion Fair
Mail to: PO Box 1844, Hickory NC 28603
Pre-Registration Required: Due August 24th

Please accept the entries indicated below subject to the rules and classifications governing exhibits at the Hickory American Legion Fair, as published in the Premium List, and by which I hereby agree to be governed in exhibiting. Each exhibitor will need a separate entry form.

DO NOT USE THIS SPACE!

Name _____
Mailing Address _____
City _____ State _____ Zip _____
Telephone _____
Youth _____ Open Class _____
Young Children _____ Age _____ Birth Date _____

Exhibitors No.

Total Premiums

Check No.

The Fair assumes no responsibility in case of loss or damage to stock or other exhibit from any cause: and upon this condition only are entries received. The exhibitor agrees to hold the Hickory American Legion Fair harmless for all liabilities and agrees that articles exhibited cannot be removed before they are released at the appropriate time. **TO COLLECT PREMIUM MONEY, W-9 FORM ON REVERSE SIDE MUST BE COMPLETED.**

Dept. K,M,N,O,P	Breed	Class	Description of Animal/Name	Registration No.	Animal Date of Birth

I accept full responsibility for the safety of my child if he/she enters the barn. The Hickory American Legion Fair is not liable for any accident occurring during the livestock show.

Signature _____ (Must be signed by Parent/Guardian)

I agree to abide by all rules and regulations set forth by the fair for livestock exhibitors. I am bound by this code of ethics.

Signature _____ (Must be Signed)

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)																			
Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.																			
	<table border="1" style="margin: auto;"> <tr><th colspan="9">Social security number</th></tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>	Social security number																	
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Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.	<table border="1" style="margin: auto;"> <tr><th colspan="9">Employer identification number</th></tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>	Employer identification number																	
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Part II Certification	
Under penalties of perjury, I certify that:	
1. 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 2. 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 3. I am a U.S. citizen or other U.S. person (defined below), and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.	
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 on page 3.	

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

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

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.