

**PERSONAL ENTRY SHEET**  
One Entry Sheet Per Person Per Department

Registration #: \_\_\_\_\_ Note: The following information is required to pay premiums.

Name: \_\_\_\_\_

☐ **SENIOR**

☐ **JUNIOR**

Address: \_\_\_\_\_

☐ BX (8 years old & under)

☐ BY (9 to 13 years old)

City: \_\_\_\_\_ Zip \_\_\_\_\_

☐ BZ (14 to 19 years old)

Email: \_\_\_\_\_

Cell: \_\_\_\_\_

**DEPARTMENT 17 - FIELD CROPS**

Home: \_\_\_\_\_

Entry Tag #	CLASS	LOT	DESCRIPTION OF ITEM	PLACE	POINTS

TOTAL ENTRIES \_\_\_\_\_

TOTAL POINTS \_\_\_\_\_