EAR TAG/LEG BAND(S)/TATOO #_____

MEDICATION DECLARATION FORM

For market animals to be sold at the Yuba-Sutter Fair Junior Livestock Auction this form must be completed and turned in at the scales at the time of weigh-in.

EXHIBITOR NAME: _____

EXHIBITOR ADDRESS: _____

EXHIBITOR HOME PHONE: _____ CELL PHONE: _____

CLUB/CHAPTER: _____ LEADER/ADVISOR: _____

Species: (Circle One): ☐ BEEF ☐ HOG ☐ LAMB ☐ GOAT ☐ TURKEY ☐ CHICKENS ☐ RABBITS

Animal Description (Breed, Sex, Color, Etc.) _____

Initial ☐ **I CERTIFY THAT MY MARKET ANIMAL ENTRY, IDENTIFIED ABOVE, COMPLIES WITH PROPER WITHDRAWAL PERIODS FOR ALL MEDICATIONS AND HORMONE TREATMENTS. Including but not limited to: antibiotics, de-wormers, anti-inflammatory drugs, diuretics, feed additives etc. Please list medications, etc. on back of form and date administered.**

Initial ☐ **I CERTIFIY THAT MY MARKET ANIMAL ENTRY, IDENTIFIED ABOVE, HAS NOT BEEN ADMINISTERED ANY PROHIBITED MEDICATIONS OR HORMONE TREATMENTS.**

As per Local and State Rules: If drug residue is found in an animal carcass during processing, the exhibitor may be held responsible for repayment to the Junior Livestock Auction Buyer and may be responsible for any additional costs.

After document has been submitted, any changes in the above information must be reported before animal is shown and/or sold at the Junior Livestock Auction.

_____

Exhibitor Signature **Age** **Date**

_____

Parent/Guardian Signature **Printed Name of Parent/Guardian** **Date**

Staff use only: Accepted by: _____ Date: _____