



## Maine State 4-H Dairy Show Registration Form

NAME: \_\_\_\_\_ 4-H AGE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TOWN: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

Number of animals you will bring: \_\_\_\_\_

Seniors (age 14-18): limit of 5 animals

Intermediates (age 12-13): limit of 4 animals

Juniors (age 9-11): limit of 3 animals

What day do you plan to arrive? \_\_\_\_\_

*\*Arrival begins Friday at 4:00pm. All animals must be on the grounds by 8:00am on Sunday.*

Do you intend to participate in the following?

\_\_\_\_\_ **Maine 4-H Fitting Contest** (you will need to bring an unclipped heifer to use in the contest)

\_\_\_\_\_ **Maine 4-H Grilled Cheese/Milkshake Contest**

Please return completed forms to Sadee Mehuren via email to [sadee.mehuren@maine.edu](mailto:sadee.mehuren@maine.edu) or mail to:

Waldo County Cooperative Extension Office  
Attn: Sadee Mehuren  
992 Waterville Rd.  
Waldo, ME 04915

**Completed registration forms must be received by July 20.**

Registration form can also be completed online at [extension.umaine.edu/4h/dairy/maine-4-h-state-dairy-show-registration-form/](http://extension.umaine.edu/4h/dairy/maine-4-h-state-dairy-show-registration-form/).



**UNIVERSITY OF MAINE SYSTEM RELEASE AND ASSUMPTION OF RISK**

I, \_\_\_\_\_ of \_\_\_\_\_  
(Name) (Address)

having been born on \_\_\_\_\_, acknowledge, declare and agree as follows:  
(Date of Birth)

1. That I have voluntarily agreed to participate in the Maine 4-H State Dairy Show from July 19, 2024 to July 21, 2024 and in consideration of being permitted to participate, do voluntarily execute this "Release and Assumption of Risk" on behalf of myself, my heirs and next-of-kin, my personal representatives and my estate.

2. That I have been fully informed of the nature, scope and demands of this activity, and I understand that participating may include activities which could be dangerous to me and others and which could cause property damage, bodily injury and/or death.

\*See below for specific risks and dangers of the activity

3. That the University of Maine System and its University of Maine Cooperative Extension, (hereinafter referred to as the "University") has informed me that there may be dangers and hazards inherent to participants because of the activities involved, and that I personally recognize and appreciate that such dangers and hazards exist. I accept and assume full responsibility for all harm and injury, of every nature, including death, which may occur to me or which I may suffer or cause to others, and for all damages or loss to any real or personal property owned by me or damaged by me, while I am participating and during all travel and transportation, and, in furtherance thereof, I agree to indemnify, hold harmless and release the University, its Trustees, faculty, employees, volunteers and agents, from and against any and all claims, demands, actions or causes of action, on account of damage or loss to my real or personal property, my personal injury or death, or the personal injury, death or damage to real or personal property of others caused by me, which may occur or result directly or indirectly from my participation in the activity and not as a direct result of any negligent act of the University, its Trustees, faculty, employees, volunteers or agents.

4. I declare that I am able to physically withstand and cope with the indicated rigors of this activity with or without a reasonable accommodation. If an accommodation is needed, I will contact \_\_\_\_\_.

5. This "Release and Assumption of Risk" shall be construed and interpreted pursuant to the laws of the State of Maine, and if any portion thereof is held invalid, void, unenforceable or illegal, the remainder shall continue in full force and effect.

**I DECLARE THAT I COMPLETELY UNDERSTAND AND HAVE FULLY INFORMED MYSELF OF THE TERMS AND CONDITIONS OF THIS "RELEASE AND ASSUMPTION OF RISK" BY HAVING READ IT, OR HAVING IT READ TO ME, BEFORE SIGNING AND I INTEND TO BE FULLY BOUND THEREBY.**

Assented and agreed to on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Participant

I, \_\_\_\_\_, the parent or legal guardian of, \_\_\_\_\_, agree, in consideration of my child being permitted to participate in this activity, to be bound by the terms of this Release and Assumption of Risk and hereby indemnify, hold harmless and release the University, its Trustees, faculty, employees, volunteers and agents, in the same manner and with the same force and effect as set forth in Section 3 above with regard to my child participating in the activity.

---

Parent or Guardian Signature (if participant under the age of 18 years)

\* Such dangers, hazards and risks of this activity may include, but are not limited to, injuries inflicted by the following:

Exposure to elements such as severe weather, heat, cold, sun, and biting insects.

Falls from all-terrain vehicles, bicycles, skateboards, scooters, or other personal transportation devices.

Fall hazards due to varied terrain.

Direct contact with livestock.

Potential exposure to COVID-19 while in a small outdoor group setting.

Use of cooking equipment including a griddle, knives, etc.

**Maine 4-H Dairy Show  
Animal Entry Form**

**Exhibitor** \_\_\_\_\_ **4-H Age** \_\_\_\_\_ **Birthdate** \_\_\_\_\_  
(Age on January 1 of this year)

**Animal Information:**

**Animal #1**

Breed \_\_\_\_\_ Show Class \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Registration # \_\_\_\_\_

ID or Tattoo # \_\_\_\_\_ LE \_\_\_\_\_ RE \_\_\_\_\_ Bred & Owned Y or N

**Animal #2**

Breed \_\_\_\_\_ Show Class \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Registration # \_\_\_\_\_

ID or Tattoo # \_\_\_\_\_ LE \_\_\_\_\_ RE \_\_\_\_\_ Bred & Owned Y or N

**Animal #3**

Breed \_\_\_\_\_ Show Class \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Registration # \_\_\_\_\_

ID or Tattoo # \_\_\_\_\_ LE \_\_\_\_\_ RE \_\_\_\_\_ Bred & Owned Y or N

**Animal #4**

Breed \_\_\_\_\_ Show Class \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Registration # \_\_\_\_\_

ID or Tattoo # \_\_\_\_\_ LE \_\_\_\_\_ RE \_\_\_\_\_ Bred & Owned Y or N

**Animal #5**

Breed \_\_\_\_\_ Show Class \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Registration # \_\_\_\_\_

ID or Tattoo # \_\_\_\_\_ LE \_\_\_\_\_ RE \_\_\_\_\_ Bred & Owned Y or N