

Exhibitor # _____ Processed By: _____ Entered By: _____

Exhibitors Entry Form For
RABBITS & CAVIES
 Cuyahoga County Fair | PO Box 135 | Berea, OH 44017
 Phone: 440-243-0090 | Fax: 440-243-0344

FAIR DATES: AUGUST 11-16, 2026 | PHYSICAL ENTRIES ENTRIES CLOSE: AUGUST 7, 2026
ANIMAL ENTRIES CANNOT BE ENTERED ONLINE

Name _____ Cell _____
 Address _____ E-Mail _____
 City _____ State _____ Zip _____

LN. NO.	BREED NO.	CLASS NO. (SEX/AGE)	EAR TAG NO.	ENTRY FEE
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

LN. NO.	BREED NO.	CLASS NO. (SEX/AGE)	EAR TAG NO.	ENTRY FEE
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				

Note: Please Refer to the Premium Book for Exhibitor Entry Requirements
 Make checks Payable to: Cuyahoga County Fair or Provide CC Info Below

CREDIT CARD: VISA MC DISC AMEX
 CARD # _____
 EXP. _____ CVV _____

MUST BE SIGNED BY PARENT/GUARDIAN IF UNDER 18

TOTAL NO. ANIMAL ENTRIES		
TOTAL ANIMAL ENTRY FEES		
EARLY ENTRY EXHIBITOR FEE <small>(Includes 2 Admissions)</small>	\$10.00	
REGULAR ENTRY EXHIBITOR FEE <small>(Includes 2 Admissions)</small>	\$15.00	
TOTAL AMT. DUE		

_____ FOR/BY _____ DATE _____
 EXHIBITOR (PRINT) EXHIBITOR/ENTRANT

Use Reverse Side of this Form for Additional Entries.

THIS FORM MAY BE DUPLICATED AS NEEDED!

RABBITS & CAVIES - CUYAHOGA COUNTY FAIR



LN. NO.	BREED NO.	CLASS NO. (SEX/AGE)	EAR TAG NO.	ENTRY FEE
27				
28				
29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
40				
41				
42				
43				
44				
45				
46				
47				
48				
49				
50				

LN. NO.	BREED NO.	CLASS NO. (SEX/AGE)	EAR TAG NO.	ENTRY FEE
51				
52				
53				
54				
55				
56				
57				
58				
59				
60				
61				
62				
63				
64				
65				
66				
67				
68				
69				
70				
71				
72				
73				
74				

Note: Complete if Separate Page.

Name _____ Phone _____ Cell _____

Address _____ City _____ State ____ Zip _____

THIS FORM MAY BE DUPLICATED AS NEEDED!