

6th Annual Livestock Judging Clinic Registration April 21, 2018

Please provide the information requested below for each junior participant in your group, including T-shirt size (if a "youth" size is required, please indicate) and preferred meal option. We are pleased to be offering once again Barbecue Delights of Schoharie, NY for this year's clinic lunch. Meal Option NUMBER 1 includes a barbecued half-chicken, baked potato, cole slaw, buttered roll and drink; Meal Option NUMBER 2 includes a pulled pork sandwich, baked potato, cole slaw, buttered roll and drink. If diet restrictions preclude both meal options, please write "other" on the meal option line and explain specific dietary requirements in the space provided at the bottom of the page—we will do our best to accommodate! We will group participants into "beginner" and "advanced" groups for clinic activities instead of grouping entirely by age. So, for each participant below, please indicate their level of experience with livestock judging/showing. REGISTRATION FEE is \$40.00 for each of the first three juniors in each group (4-H, FFA, family or otherwise) and \$35.00 for each additional junior. Parents, group leaders, and other adult attendees may join the juniors and will only be charged for meal expenses (\$12.00/adult) if ordered.

For questions or additional information, please contact: Club Advisor Dirk Schubert at schubedp@cobleskill.edu or 518-255-5615

Event Chair Emma Rose Wegner wegnere254@cobleskill.edu

Event Co-Chair Ainsley Robbins robbina307@cobleskill.edu

Send form and payment to: Dirk Schubert- 121 Schoharie Parkway North, Cobleskill NY 12043
Postmarked by MONDAY, APRIL 9. We cannot guarantee t-shirts for late registrants.

I understand that a photograph, video recording, audio recording, or other electronic or digital method of recording my likeness taken of me by SUNY Cobleskill (hereinafter the College), its employees or agents may be used by the College for advertisement, publicity, or information distribution.

I hereby irrevocably authorize the college to copy, publish, exhibit or distribute in any legal manner, any and all images, videos, audio recordings and electronic or digital recordings in which my likeness appears. I further waive any right to inspect or approve any advertisement, publication or information piece in which my likeness appears. I hold the College harmless and release and discharge the College, its employees and agents, from any claims, demands, or causes of action which I, my heirs, representatives, executors, administrators or other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

Signature

Print Name

Date

Email

Address

Phone Number

City

State

Zip

Student ID Number

If the person signing above is under 18 years old, the consent of a parent or guardian is required.

I, _____, certify that I am the parent or guardian of the minor signing above and consent without reservations to the release agreement signed by him or her.

Parent/Guardian

Print Name

Date

Address

Phone Number

Email

PLEASE RETURN TO:

SUNY Cobleskill
Office of Communications and Marketing
Knapp Hall 222
Cobleskill, NY 12043 (518) 255-5631

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Signature

Print Name

Date

Email

Address

Phone Number

City

State Zip

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