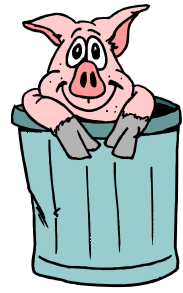




**Jr. Pig Wrestling Entry Form
Shawano County Fair
Sunday, September 6th, 2009**



Must be ages 9 to 12 years old.

Name of Team: _____

Contact Phone #: _____

Participants:

1. _____

2. _____

3. _____

4. _____

I/we the undersigned do hereby agree to participate in the Pig Wrestling Contest at the Shawano County Fair and I/we do hereby agree **NOT** to hold the Pig Wrestling Contractor and its representatives or the Shawano Area Agricultural Society or any part of this event responsible in case of an accident. I/we have read the rules and completely understand and will abide with all rules.

Signatures:

1. _____ Date: _____

2. _____ Date: _____

3. _____ Date: _____

4. _____ Date: _____