



# Baytown Youth Fair & Livestock Association



## Scramble Application

(Please Print)

Exhibitor's Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Exhibitor's Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ T-shirt size: \_\_\_\_\_

Exhibitor's Parent's Name: \_\_\_\_\_

Parent's Phone: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent's E-Mail: \_\_\_\_\_

Organization: \_\_\_\_\_ Advisor: \_\_\_\_\_

What species are you scrambling for: (circle one) Steer Swine Lamb Goat

Have you ever been a scramble recipient?  Yes  No If yes, what species: \_\_\_\_\_

Are your parents willing to support you in this activity both physically and financially? \_\_\_\_\_

Do you agree to submit regular monthly reports to the scramble committee, sponsor, VAT or 4-H Leader and follow all rules set forth by the BYF Rule Book? \_\_\_\_\_

Do you have asthma? Yes or No If yes, please bring the proper treatment medication with you.

List any allergies to medications you may have:

\_\_\_\_\_

Have you been treated for any major illness in the past 12 months: Yes or No

If yes, please explain:

\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

VAT or 4-H Leader Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applications for potential scramblers MUST be signed by applicant, a parent or legal guardian, and by the Ag Science Teacher or 4-H Leader.

**This form must be accompanied by a notarized "Minor's release and indemnity agreement"**

