

MINNESOTA STATE FAIR

FFA Dormitory Pre-registration

Dormitory Desired (choose one)

Cattle Barn #1, #2

Swine East

Swine West

Email to: Stephanie Brandt

stephanie.brandt@sibleyeast.org

**Please check the appropriate box for gender.
Assignments will be made on a first come, first served basis.**

1)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
2)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
3)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
4)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
5)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
6)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
7)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
8)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
9)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
10)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
11)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
12)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
13)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
14)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
15)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
16)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
17)	_____	<input type="checkbox"/> Male	<input type="checkbox"/> Female

~OVER~

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School

Teacher of Agriculture

If the teacher is NOT going to be present in the dormitory each night, please include signature of the adult responsible during your absence.

I _____ have agreed to accept responsibility
(name)

for supervising the student exhibitors from the _____
(Chapter Name)

Please assign them bunks with members from _____

Signed:

(Individual(s) accepted responsibility)

All exhibitors will be required to turn in their Rules of Conduct at the time they receive their bunk assignments. (Signed by Advisor, Parent/Guardian of Exhibitors)