

2025 State 4-H Dairy Judging Contest

Payment Form



County: _____

		Cost	Total
# of Juniors		X \$15	
# of Seniors		X \$15	
# of Adults		X \$15	
# of Cloverbuds		X \$15	
	Total Due		

Please send one check per county made payable to the **Kentucky 4-H Foundation**

Please list adults attending and let me know who is willing to help.

Names of Adults Attending	

Thank You!

Mail to:

Larissa Tucker

Extension Associate for Dairy Youth

406 W. P. Garrigus Building

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