

State Fair FFA Dormitory Pre-registration

Dormitory Desired (circle one)

Cattle Barn #1, #2

Swine East

Swine West

Send to: Joel M. Larsen, State FFA Advisor
Minnesota Education Department
1500 West Highway 36
Roseville, MN 55113
***Fax: (651) 582.8493

**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 |

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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)