



2024 Williamson County Livestock Association
Project Visit Form

11. INSPECTION OF PROJECTS: The WCLA Directors may inspect any exhibitor's project at any time after the validation deadline until show time. Two or more WCLA Directors will conduct such inspections. If available, a parent, AST and/or CEA may accompany the WCLA Directors on the project inspections. Failure to provide access to any project validated for the WCLA Livestock Show for inspection shall be grounds for disqualification of the project and exhibitor from participating at the WCLA Livestock Show. If upon inspection, a WCLA validated project is found to not be in the personal care of the exhibitor, the project and the exhibitor will be disqualified from participating at the WCLA show. In the event a state livestock validation committee disqualifies a project or exhibitor due to violations of the state validation rules, such a violation may also be considered a violation of these rules and subject the project and exhibitor to disqualification from participating at the WCLA Livestock Show.

ATTENTION: Please list the address the livestock will be housed at below. The address where the animal(s) will be located should be approved by the CEA or AST and the WCLA Board of Directors. If a housing address change occurs during the feeding period, the exhibitor is responsible for immediately notifying their supervising CEA or AST as well as the division superintendent of the WCLA. Feeding projects on property other than the school barn facility or exhibitor's premises must be approved by the CEA or AST and the WCLA Board of Directors.

Physical Address of Livestock Housing City Zip Code

Exhibitor Mailing Address City Zip Code

Signatures of Acknowledgement: These signatures verify you have read the 2024 WCLA Show Rules in its entirety. Please return this page completed and signed.

Exhibitor (Print) Exhibitor (Signature) Date

Exhibitor Family Email Address:

Parent/Guardian (Print) Parent/Guardian (Signature) Date

Supervising CEA/AST (Print)

Supervising CEA/AST (Signature)

Date

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FFA Chapter and/or County 4-H Name

School Name