

**DUE: September 13, 2025 \*Late Entry October 10, 2025**

## Klein ISD Livestock and Project Show Entry Form / Non-Group Purchase

**Directions:** Fill out completely and submit with payment (cashier check/money order/credit card).

*A service fee will apply to credit card payments.*

*Money orders should be made payable to the **Klein ISD Show Association**.*

*All exhibitors must complete a W-9 and provide their SSN for tax purposes.*

**Student Name:** \_\_\_\_\_ **Campus (Circle One):** K KF KO KC KCain

**Address:** \_\_\_\_\_ **Parent Email:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

### Breeding Livestock

Species	Entry	Entry Fee	Total
Jr Breeding Beef	DOB: _____ <input type="checkbox"/> AOB <input type="checkbox"/> Brittish <input type="checkbox"/> Continental	\$25	\$_____
Poultry (max 4)	Quantity: _____	\$10 each	\$_____
Rabbit Total Entry limit of 6 Head. Max of 1 entry/class.	Quantity: _____ <input type="checkbox"/> Jr Buck <input type="checkbox"/> Int Buck <input type="checkbox"/> Sr Buck <input type="checkbox"/> Jr Doe <input type="checkbox"/> Int Doe <input type="checkbox"/> Sr Doe	\$10 each	\$_____

### Ag Mechanics

Type	Division	Entry Fee	Total
Team / Individual (circle one)	<input type="checkbox"/> Ag Machinery and Equipment <input type="checkbox"/> Truck, Tractor, and Agriculture <input type="checkbox"/> Equipment Accessories <input type="checkbox"/> Electrical Equipment <input type="checkbox"/> Outdoor Convenience <input type="checkbox"/> Indoor Home Convenience <input type="checkbox"/> Wildlife Equipment <input type="checkbox"/> BBQ Pits <input type="checkbox"/> Livestock Equipment <input type="checkbox"/> Trailers	\$25	\$_____

**Description of Entry:**

Agriculture Science Fair

Division	Entry Fee	Total
<input type="checkbox"/> Division 1 Individual member in grades 9 & 10	\$10	\$_____
<input type="checkbox"/> Division 2 Individual member in grades 11 & 12		

Photography	Entry Fee	Total
I, undersigned, do hereby certify that the Photography entry is the result of the contestant's own originality, effort, and ability. We understand that plagiarism will automatically disqualify the contestant	\$10	\$_____
Student Signature: _____		

Floral Design	Entry Fee	Total
1 Entry/Eligible Member	\$50	\$_____

Horticulture \*Limit of 1 entry per class, all entries must have a start date of November 5th, 2025

Ornamental Division	Vegetable Division	Entry Fee	Total
<input type="checkbox"/> Hanging Basket	<input type="checkbox"/> Plate Vegetable	\$10	\$_____
<input type="checkbox"/> Terrarium Class	<input type="checkbox"/> Bunch Vegetable		
<input type="checkbox"/> Potted Plant Under 6 in	<input type="checkbox"/> Other Vegetable		
<input type="checkbox"/> Potted Plant 6-10 in			
<input type="checkbox"/> Potted Plant Over 10 in			
<input type="checkbox"/> Bonsai			
<input type="checkbox"/> Dish Garden			
<input type="checkbox"/> Topiary			
<input type="checkbox"/> Other Ornamental			

Total Due to Klein ISD Show Association: \$\_\_\_\_\_

Show Extras (Optional Orders)

Item	Price	Quantity	Total
Show Shirt (Unisex S–3XL)	\$20 each	_____	\$_____
Yard Sign	\$25 each	_____	\$_____

Shirt Size(s): \_\_\_\_\_  
(List quantities by size, e.g., 1-S, 2-M, 1-XL)

Total for Extras: \$\_\_\_\_\_

Grand Total (Entries + Extras): \$\_\_\_\_\_

## Klein ISD Project Show Rules Statement and Media Release

Student Name: \_\_\_\_\_

School: (circle one)

Klein

Klein Forest

Klein Oak

Klein Collins

Klein Cain

Show Rules Statement

I have received a copy of the show rules and attended a show rules meeting. I understand the show rules and agree to comply with them.

Student Signature \_\_\_\_\_ Parent Signature \_\_\_\_\_

### Media Release

We, the parents/guardians of , \_\_\_\_\_ hereby authorize officials of the Klein Independent School District To release information about our child which is known to or maintained by Klein ISD, its agents, employees, representatives and trustees, to permit school officials to respond to media inquiries involving our child. We understand that this authorization includes any information covered by the Family Educational Rights Privacy Act("FERPA"), 20 U.S.C. Section 1221, and Section 552.114 of the Texas Government Code. We further permit news media representatives to release this information to the public.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

<b>W-9</b> <small>Form (Rev. January 2005) Department of the Treasury Internal Revenue Service</small>	<b>Request for Taxpayer Identification Number and Certification</b>	<b>Give form to the requester. Do not send to the IRS.</b>					
Print or type see specific instructions on page 2	Name (as shown on your income tax return) _____						
	Business name, if different from above _____						
	Check appropriate box: <input type="checkbox"/> Individual/ Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶ _____ <input type="checkbox"/> Exempt from backup withholding						
	Address (number, street, and apt. or suite no.) _____						
	City, state, and ZIP code _____						
List account number(s) here (optional) _____							
<b>Part I Taxpayer Identification Number (TIN)</b>							
<p>Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.</p> <p><i>Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.</i></p>							
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center;">Social security number</td></tr><tr><td style="text-align: center;">      +        </td></tr><tr><td style="text-align: center;">or</td></tr><tr><td style="text-align: center;">Employer identification number</td></tr><tr><td style="text-align: center;">  +            </td></tr></table>			Social security number	+	or	Employer identification number	+
Social security number							
+							
or							
Employer identification number							
+							
<b>Part II Certification</b>							
Under penalties of perjury, I certify that:							
<ol style="list-style-type: none"><li>1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and</li><li>2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and</li><li>3. I am a U.S. person (including a U.S. resident alien).</li></ol>							
<p><b>Certification instructions.</b> You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)</p>							
<b>Sign Here</b>	Signature of U.S. person ▶ _____	Date ▶ _____					