

Community Exhibit

Entry Form

Office Use Only
Exhibitor #

Each exhibitor must have his/her own entry form.

First Name: _____ Last Name: _____
 Address: _____ Postal Code: _____
 E-Mail: _____ Phone #: _____
 Age if under 18: _____

#	Section	Class #	Class Name	Entry Fee	Office Use Only
1					
2					
3					
4					
5					
6					
7					
8					

Use other side for more entries.

Entry Fees
 PAYABLE BY EMT ONLY
macgregorfair@hotmail.com

Community Exhibit: \$1.00/entry/class
Membership fee: Per exhibitor, \$5.00/adult or \$2.00/18 & under

Total Number of Entries:	
Entry Fee:	
Membership Fee:	
Total Fees:	

*Thank you for entering and
 Good Luck!*

#	Section	Class #	Class Name	Entry Fee	Office Use Only
9					
10					
11					
12					
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