2011 Mason Area Fair Entry Form

Department: _____ **4-H** YES ☐ NO ☐ **FFA** YES ☐ NO ☐

☐ ADULT ☐ YOUTH, IF YOUTH, AGE: _____ Entered in other department? YES ☐ NO ☐

NAME: _____ TELEPHONE: _____

MAILING ADDRESS: _____ EMAIL: _____

CITY: _____ STATE: _____ COUNTY: _____ ZIP: _____

_____ *please initial* I agree to abide by all the rules governing exhibits annd exhibitors as presented in the premium guide. I understand that all exhibits will be given as much care/protection as possible, but no liability for loss, damage or injury to the exhibits can be assumed by the Mason Area Fair and its agents.

_____ *please initial* I would like to donate my premiums to the **Mason Area Fair Association**

Division	Class	Lot	Description Entry (see premium guide)	BLUE	RED	WHITE	POINTS
			SUB-TOTAL				
						Total points this page:	

Superintendent signature: _____ CONTACT: _____

SUPERINTENDENT NOTES:

TOTAL POINTS: _____ OFFICE COMMENTS:

$ _____

PAYMENT METHOD: PAGE ___ OF ___

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