

Entry Form A (All Divisions Except Animals)

_____ **Junior Department**

_____ **Senior Department**

Please Mark Junior or Senior Department

_____ Junior's Birth date _____ Age _____

_____ Last Name _____ Middle Initial _____

_____ Address _____ Phone Number _____

1890 Briggs Street, Anderson CA 96007



530-378-6789

530-378-6788 FAX

_____ City _____ State _____ Zip _____ Email address _____

Consult Premium Book for Division and Class Numbers, Entry Fees, and Entry Closing Dates

| Office Use Only | Division | Class | Name, Kind, Variety, or Description | Art / Photo Sale or NFS | Price | Canning Ball/Kerr | Entry Fee |
|-----------------|----------|-------|-------------------------------------|-------------------------|-------|-------------------|-----------|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |

Entry Forms May Be Photo Copied

| | |
|----------------------------|-----------|
| For Office Use Only | |
| Entry Fees | _____ |
| Other | _____ |
| Amount Enclosed | _____ |
| Receipt No. | By: _____ |

THIS BOX MUST BE COMPLETED FOR ENTRY TO BE CONSIDERED COMPLETE!

Club or Chapter: _____ Leader's Name: _____

The undersigned states herewith, that he/she is a recognized exhibitor or supervisor of the project of which the above entries are part; that to his/her personal and actual knowledge the statements regarding the same are true; and he/she further states that he/she has read and fully understands the rules & regulations governing the same and agrees to abide by them.

X

Exhibitor signature

Parent/guardian signature _____

Instructor, Co. Agent or Local Leader signature _____