

ADULT DEPARTMENT ENTRY FORM

Except Horse Show & Livestock

AMADOR COUNTY FAIR

26th District Agricultural Association

P.O. Box 9, Plymouth, CA 95669

209/245-6921

Form May be Photocopied

PLEASE PRINT OR TYPE

Name of Exhibitor/Legal Owner _____ Telephone _____ e-mail _____

Mailing Address _____ City _____ Zip _____ Date _____

RELEASE & WAIVER OF LIABILITY: Please accept the entries (property) described herein. I have read, understand and agree to abide by all the rules and regulations governing the Fair entries as published in the official Premium Book. I agree to indemnify, defend and hold harmless the Amador County Fair and the State of California, their officers, agents and employees from any and all claims and losses accruing or resulting to any and all persons in connection with my participation in the Fair and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged as a result of my participation.

I certify that I have read the statement listed above.

Parent/Guardian: I certify that I have read the statement listed above

Signature of Owner/Agent _____

Signature of Parent or Guardian of Exhibitor under 18 _____

CONSULT PREMIUM BOOK FOR CLASS NUMBERS, ENTRY FEES, ENTRY CLOSING DATES & EXHIBIT RECEIVING DATES

PLEASE USE SEPARATE FORM FOR EACH DEPT. **PLEASE** () Floriculture () Clothing () Crafts () Baked Foods () Preserved Foods () Plein Air
CHECK () Ag-Hort () Art () Photo () Gems & Minerals () Special Competitions () Fair Time Photo
ONE () Commercial Microbrew () Home-brew () Gardens () Feature Exhibits

Fair Use Only	Entry No.	Division No.	Class No.	Use Description in Premium Book Where instructed, specify name, kind, type, etc. Art & Photo Entries - Please list title of work	Entry Fees	Art & Photo Sale Price	Fair Use Only
	1						
	2						
	3						
	4						
	5						
	6						
	7						
	8						
	9						
	10						
	11						
	12						
	13						
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	18						
	19						
	20						

Fair Use Only
 Date Paid _____
 Receipt No. _____
 Exhibitor No. _____

Total Entry Fees \$ _____

Optional: Exhibitor 4-day pass available - Limit 1 per exhibitor
 Entries must total \$5 or more \$ _____

TOTAL FEES \$ _____

Rev. 03/24

***** Please Use A Separate Entry For Each Department !!! *****
 (ie. Baked Foods, Art, Photo, Clothing etc.)