

2019 PINAL COUNTY FAIR Departments "A through J" - ENTRY FORM

512 S. 11 Mile Corner Road, Casa Grande, Arizona 85194

YOU MUST USE A SEPARATE ENTRY FORM FOR EACH DEPARTMENT ENTERED

Read Carefully: Entries MUST be made on official Pinal County Fair Entry Form. Photocopies are acceptable. Entry forms will not be accepted without proper fees (if applicable) and signatures. Please completely fill out the Form. PLEASE PRINT CLEARLY.

Step 1: Exhibitor Information

Name of Exhibitor (First)	(Last)	Telephone #
Mailing Address	City	County State Zip
Email Address	Date of Birth	Age

Step 2: Exhibit Information

For Office Use Only: Entry No.	Dept. Letter	Division No.	Class No.	Sub-Class No.	Description of Article (Details about Article; Size, Color, Etc.)	Entry Fee
Sub-Total Entry Fees (Front of Form)						
Sub-Total Entry Fees (Back of Form)						

Step 3: Required Signatures

Please accept the entries indicated on this form, subject to the rules and classification governing the exhibits as published in the Fair Information Book of the current year by which I hereby agree to be governed in exhibiting the same, and declare that all statements made in connection with said entries are true. I hereby release the Pinal County Fair from any liability from loss, damage or injury to livestock or other property, while said property is on the Fairgrounds. This entry is subject to the approval and acceptance of the Pinal County Fair. I have read and understand the above clause. Parent/Guardian must sign if exhibitor is under 18 years of age.

Exhibitor Signature:

Parent/Guardian Signature (If exhibitor is under 18 years of age):

Total Entry Fees	
Youth Pass (ages 6 to 18) \$8.00 each	
Adult Pass (ages 19 & over) \$15.00 each	
One Day Unlimited Carnival Ride Pass - \$20.00	
Total Fees Due PCF	

**ENTRY DEADLINE: Postmarked by March 11, 2019
ONLINE ENTRIES (DUE BY MARCH 11, 2019)
www.PinalFairgrounds.com**

Yes, I want to keep the Blue Ribbon fair alive in Pinal, by donating any premiums I may receive back to the Pinal County Fair.

FOR OFFICE USE ONLY: YP	AP	RPKG	Receipt #:	Total \$
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