

# OPEN JUNIOR 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	Date of Birth	Age
/ /				

Mailing Address	City	Zip	Date	
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**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
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Were you entered in the Fair last year?... Yes? ( ) No? ( ) Check here if your address has changed ( )
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**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  
**CHECK** ( ) Vegetables ( ) Art ( ) Photo ( ) Special Competitions ( ) Banners  
**ONE** ( ) Table & Place Settings ( ) Misc. Projects ( ) Feature Exhibits

Fair Use Only	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	Fair Use Only Entry No.
	1				
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				
	11				
	12				
	13				
	14				
	15				

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

Total Entry Fees \_\_\_\_\_

Optional: Exhibitor 4-day pass available  
 \$8.00 (7-12) if Entries Total \$3.00  
 \$20.00 (13 & over) if Entries Total \$5.00

**TOTAL FEES** \$ \_\_\_\_\_

