

Madison County Fair 2020

“A Fair to Remember”

Agriculture & Horticulture Entry Form

Exhibitor Name: _____ Age: _____
(Please Print)

Address: _____ County: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

Please accept the entries indicated below, subject to the rules and classifications governing exhibits as published in the Exhibitors Handbook 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 Madison County Fair from any liabilities for loss, damage or injury to exhibits or other property, while the same are on the fairgrounds or at any other time or place. **I hereby agree that the Madison County Fair is not responsible for articles left after 30 days.**

Signature of Exhibitor: _____ Date: _____

DEPT	DIV	CLASS	NAME OF CLASS (USE EXACT WORDS FROM THE HANDBOOK)	ENTRY TAG NUMBER

Select and initial one of the following:

Please keep my items to be picked up during the times below. _____

I do not plan on picking up my items, please discard. _____

***** All items must be picked up on Monday, August 17, 2020 between 9 AM and 5:30 PM*****

Thank you for participating and helping make our fair awesome!