



Warren County Fair Association

P.O. Box 1555
Front Royal, VA 22630

Phone: 540-635-5827
Email: wcfair@comcast.net
Website: www.warrencountyfair.com

The Warren County Fair Association would like to invite you to participate in a “Day Care Day” at the Warren County Fair on Wednesday, July 29, 2026, for the reduced price of \$5 per child (no charge for the chaperones). The tentative schedule of events would be as follows:

9:30 Check-In

9:45-11:00 Tour of the Barns, Tour of the Wonder Building, participate in the activities on the lawn, 4-H camp songs.

11:00 Side Show Performance

11:30 Picnic Lunch (bring your own)

This gives kids who may not otherwise get to attend the Fair a chance to experience at least a portion of the fun!

Please return the registration form to the above address or email me the number of participants so we are able to coordinate our volunteers.

I have also included a copy of our Home Goods & Crafts Contests Guide Booklet. Feel free to make copies to send home with the kids and adults. We would love to see everyone’s creations at the fair this year!

If you have any questions or concerns, feel free to email me at wcfair@comcast.net.

We look forward to seeing you and having a great time!

Sincerely,

Kandi Lamb

Warren County Fair Association



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2026 Day Care Day

As a participant in the Warren County Fair, I assume complete responsibility for personal injury to me or damage to property which may occur during the event or while I am on the premises of the event. I hereby release and hold harmless the sponsor, promoters, and all other persons associated with the event from any and all liability for personal injury or property damage. I grant permission for any and all of the foregoing to use any photographs, video tapes, motion pictures, recordings or any other record of this event for any purpose whatsoever. I have read this Waiver, understand it and sign below of my own free will.

DAY CARE FACILITY NAME PHONE

ADDRESS CITY STATE ZIP

CONTACT PERSON _____ E-MAIL: _____

Number of children attending: _____ X Cost per child \$5.00 =Total Due _____

Please check method of payment:

_____ Check _____ Credit Card # _____ Expires _____

Credit Card payments will add a 5% convenience fee.

Checks can be mailed to:

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