SALINE COMMUNITY FAIR
NON-LIVESTOCK EXHIBIT ENTRY FORM

The Fair reserves the right ot pro-rate premiums if fair revenues are insufficient to cover expenses.
All exhibits must be entered by noon on Tuesday unless otherwise stated.

☐ **Check if name or address change** **Exhibitor number** ☐

Exhibitor Name

Address

City **State** **Zip**

Phone **Date of Birth (youth only)**

Email

Department	Section	Class	Class Description	Placing

☐ **I wish to donate my premiums back to the Saline Community Fair**

Signature _____

TURN INTO A SUPERINTENDENT AFTER ENTERING EXHIBITS