2019 MASTER COPY OF TOTAL ENTRIES

Sheet #___ of ___

SEND TO:
Middlesex County 4-H Fair
P.O. Box 352
Westford, MA 01886-0352

Be sure to include ALL ENTRIES in FAIR

Use blue or black pen only
Please Print Neatly
DO NOT USE THIS FORM FOR CLOVERBUD ENTRIES

NAME OF EXHIBITOR

MAILING ADDRESS

( )
TELEPHONE

Check General Rules to confirm your division! (i.e. Novice, Jr, Sr)

TOWN STATE ZIP

EMAIL ADDRESS:

DATE OF BIRTH

AGE AS OF JAN. 1, 2019

PLEASE WRITE # OF STATIC EXHIBITOR SLIPS NEEDED: ____ NOVICE ____ JUNIOR ____ SENIOR

4-H CLUB

☐ Check if OVERNIGHTER
(Enclose Overnighter Form Plus $30.00) TOTAL ENTRY FEES ENCLOSED $

DEPARTMENT NAME	DEPT. NO	CLASS LETTER	LOT#	FEE	NAME OF ANIMAL OR ARTICLE DESCRIPTION, COLOR
EXAMPLE: FOOD DEPARTMENT	*19*	*A*	*29*	*$2.00*	*CHALLENGE LOT - OATMEAL RAISIN COOKIES*

TOTAL FEES FOR PAGE $

The exhibitor agrees to be solely responsible for any loss or injury to, or damage done, occasioned by or arising from any animal or exhibit; and to defend and indemnify the 4-H Fair and the Directors thereof against all claims and liability in regard thereto. Upon these conditions only will entries be accepted.

PARENT'S SIGNATURE