Stratford & District Agricultural Society

FALL FAIR ENTRY FORM

The following entries are made according to the Rules and Regulations of the Stratford & District Agricultural Society, Which I hereby accept.

Name:_____ Date:_____

Address:_____ Exhibitor No. _____

City:_____ Postal Code:_____

School:_____ Grade:_____

Email:_____ Age if under 18_____

Class	Section #	Description	Office Use Only	

HOMECRAFT AND SCHOOL FAIR EXHIBITORS WILL USE THE SAME FORM

TURN PAGE OVER...

Class	Section #	Description	Office Use Only	
			TOTAL WON	
			2023 Membership	
			Amount Due to Exhibitor	

Signature		**Exhibitor #**	