G E N E R A L E N T R Y F O R M

ONE EXHIBITOR PER ENTRY FORM

Name of Exhibitor _____ YOUTH - Age _____ (15 & under)

Mailing Address _____

City _____ State _____ Zip _____ Phone _____

Email Address _____ Cell Phone _____

Entry Form must be completed by exhibitor and mailed to Fair Secretary, Four Town Fair, Box 24, Somers, CT 06071 on or before September 1st. MAIL ENTRIES AS SOON AS POSSIBLE. Please read rules and regulations regarding time and location exhibits must be in place.
e-mail: four.town.fair@snet.net **(not for Livestock entries - use Livestock Forms in back of book)**

Use one line for each specimen. *Do not write in these columns.*

Class #	Lot #	Name of Exhibit - Please Specify Varieties, etc.	Awd.	Amt.

For more entries continue on back. Extra entry forms can be obtained from the Secretary.

Total _____

G E N E R A L E N T R Y F O R M

CONTINUED from front

Do not write in these columns.

Class #	Lot #	Name of Exhibit - Please Specify Varieties, etc.	Awd.	Amt.

Total _____