

Return Entry Form & Check for All Fees Payable To:

**AMERICAN LEGION COUNTY FAIR  
P O Box 147, 883 North Julian St.  
Ebensburg, PA 15931**

Carefully read and understand the General Rules and Regulations.

***I understand as an exhibitor I am solely responsible for any loss, injury, damage done or occasioned by or arising from any exhibit I have entered. I shall indemnify and hold harmless the American Legion County Fair against such loss, injury or damage.***

***The exhibitor is responsible for providing a Complete Name and mailing Address. Premium checks will be held at the fair office due to illegible / insufficient addresses. Returned checks will not be reissued.***

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State, Zip Code: \_\_\_\_\_

Depart.	Section	Class	Articles: Use Wording-Premium Book	Fees
22	3			\$ 3.50 fee waived if also entering in Departments 12 thru 23
22	3			
<b>I Agree to Abide by the Code of Show Ring Ethics &amp; Understand that all Judge Decisions Are Final</b>				<b>Total</b>

I would like to donate my premiums back to the fair.

\_\_\_\_\_  
(Signature of Exhibitor) DATE: \_\_\_\_\_

Yes

\_\_\_\_\_  
(Signature of Parent/Guardian) DATE: \_\_\_\_\_

No

**One Exhibitor per form.**

**Stock Class  
Department 22 - Section 3**

**Modified Class  
Department 22 - Section 3**

Class	
32.	3 – 5 Years Of Age
33.	6 – 8 Years Of Age

Class	Modified Class
34.	3 – 5 Years Of Age
35.	6 – 8 Years Of Age