

Department 22

STONEBOAT HAY HAULING CONTEST

AMERICAN LEGION COUNTY FAIR

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.

| Depart. | Section | Class | Description | Fees |
|---------|---------|-------|--|----------------------|
| 22 | 3 | 31 | Stone Boat Hay Hauling / Team Name: _____ | \$10.00 |
| | | | I Understand that all Judge Decisions Are Final | Total \$10.00 |

Team Member # 1 AGE: _____

Name: _____ Phone: _____

City: _____ State, Zip Code: _____ Date: _____

(Signature of Exhibitor)

(Signature of Parent/Guardian)

Team Member # 2 AGE: _____

Name: _____ Phone: _____

City: _____ State, Zip Code: _____ Date: _____

(Signature of Exhibitor)

(Signature of Parent/Guardian)