Office Use Only

No. _____

KIMBERTON COMMUNITY FAIR

HOME ARTS ENTRY FORM - DEPT. 10, Sec. 18 through DEPT. 24

Pre-Registration **MAIL:** 9 Ebelhare Road, Pottstown, PA 19465; Attn: REGISTRATION

ONLINE: www.kimbertonfair.org to enter directly through the website

FEES: **$0.00**

Complete entire form. All Entries must be pre-registered. Deadline: JULY 11

Unless otherwise noted in the Catalog

Exhibitor Name:			
Mailing Address:			
City, State, Zip:			
Telephone:	( )	E-Mail:	
Birthdate:	_____/_____/_____	First-Time Exhibitor:	YES ☐ NO ☐

USE A SEPARATE FORM FOR EACH DEPARTMENT (forms may be photocopied)

DEPT.	SECTION	CLASS	ENTRY DESCRIPTION

I have read, understand and agree to abide by and uphold the General and Entry Rules, and have indicated my agreement by affixing my signature below.

Parent Signature: _____ 4-H Leader Signature: _____

for exhibitors under age 18 *for exhibitors in Dept. 10*

Exhibitor's Signature: _____ Date: _____

Office Use Only

No. _____

KIMBERTON COMMUNITY FAIR

HOME ARTS ENTRIES - DEPT. 10, Sec. 18 through DEPT. 24

Pre-registration: **MAIL:** 9 Ebelhare Road, Pottstown, PA 19465; Attn: REGISTRATION

ONLINE: www.kimbertonfair.org to enter directly through the website

FEES: **$0.00**

Complete entire form. All Entries must be pre-registered. Deadline: JULY 11

Unless otherwise noted in the Catalog

Exhibitor Name:			
Mailing Address:			
City, State, Zip:			
Telephone:	( )	E-Mail:	
Birthdate:	_____/_____/_____	First-Time Exhibitor:	YES ☐ NO ☐

USE A SEPARATE FORM FOR EACH DEPARTMENT (forms may be photocopied)

DEPT.	SECTION	CLASS	ENTRY DESCRIPTION

I have read, understand and agree to abide by and uphold the General and Entry Rules, and have indicated my agreement by affixing my signature below.

Parent Signature: _____ *for exhibitors under age 18*

4-H Leader Signature: _____ *for exhibitors in Dept. 10*

Exhibitor's Signature: _____ Date: _____