

PLEASE PRINT OR TYPE

LAST NAME _____ FIRST NAME _____ M.I. _____
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 SCHOOL/ORGANIZATION _____



1850 W CLEVELAND AVE
 MADERA, CA, 93637
 559-674-8511
 WWW.MADERAFAIR.COM

**STILL EXHIBITS
 FLORICULTURE**

(Please circle correct Department)

ADULT (19 yrs +) **JUNIOR** (18 yrs -)

SPECIAL CONTESTS **4-H** **FFA**

Club / Chapter _____

Age _____ Grade _____

		Name, Kind, Variety, Brief Description		Entry Fee
Division Number	Class Number			
1				
2				
3				
4				
5				
6				
7				
8				
9				

TOTAL FEES \$

Consult Exhibitor's Handbook For Division and Class Numbers, Entry Fees, And Closing Dates

The exhibitor agrees to defend, indemnify and hold harmless the Fair, the county and the State of California from and against any liability, claim, loss or expense (including reasonable attorney's fees) arising out of any injury or damage which is caused by, arises from or is in any way connected with participation in the program or event, excepting only that caused by the sole active negligence of the Fair. The Fair Management shall not be responsible for accidents or losses that may occur to any of the exhibitors or exhibits at the Fair. The exhibitor (or parent or guardian of a minor) is responsible for any injury or damage resulting from the exhibitor's participation in the program or event. This includes any injury to others or to the exhibitor or to the exhibitor's property. Exhibitor has read, understands and agrees to abide by all of the rules published in the Fair's Exhibitor Handbook.

FOR FAIR USE ONLY:
 DATE RECEIVED: _____

Exhibitor Signature: _____ **Parent/Guardian Signature:** _____

RECEIVED BY: _____

I certify that this entry is the project of the exhibitor and is eligible to be shown in accordance with the rules of this show.

Advisor/Leader/Teacher Signature & Phone Number: _____ **Club / Chapter:** _____

EXHIBITOR NO: _____

Exhibitor Last Name: _____ Exhibitor First Name: _____