

Membership Paid _____

Exhibitor Number: _____

FOLEY FALL FAIR EXHIBITOR ENTRY FORM

NAME: _____

ADDRESS: _____

TOWN/POSTAL CODE: _____

DATE OF BIRTH (if under 18): _____(DD/MM/YR)

EMAIL: _____

I hereby certify and absolutely declare that the articles listed below and so entered by me for exhibition are bonafide, my property and were grown or made by me as required by the Rules and Regulations of the Foley Agricultural Society. It is understood that the winners' names and/or photos may be published.

Signature

Note: If the proposed participant is 16 years of age or under, this form must be signed by a parent or guardian.

I am a new Exhibitor YES () NO ()

Class	Section	Description

The person named above hereby applies to participate in event(s) and/or exhibit articles at the Fair of the Foley Agricultural Society. In consideration of being permitted to participate, the above noted hereby releases the Foley Agricultural Society, their members, agents, and employees from and against all claims, demands, losses, costs, damages, actions, suits, or proceedings by any third party that may arise out of, or may attribute to, all operations performed by or carried out by the person, his agents, employees, or servants or anyone for whose acts he may be liable, howsoever caused.

