

One Exhibitor Per Entry Blank • Make Checks Payable to: **Clinton County Fair**

Science & Arts Building

Classes J K L M N O P

Mail Entries & Payment to: Denise Sinclair, 1131 Randolph, Carlyle, Illinois 62231 or
E-Mail: clintoncofairentries@gmail.com

Phone _____

Soc. Sec # _____ - _____ - _____
(required in order to receive premium)

Name _____

Address _____ Zip _____ City _____

| Dept. Letter | Section Letter | Entry No. | Description | Dept. Letter | Section Letter | Entry No. | Description |
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Entry Fees

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|--|---|-----------|------|
| | | # entries | |
| \$0.75 | x | | = \$ |
| \$3.00 *for Class J 1068 | x | | = \$ |
| Exhibitor Parking Pass (for Monday – Saturday evening) | | | |
| \$5.00 | x | | = \$ |
| Total Amount | | | = \$ |