

Douglas County Fair

Static Exhibit Entry Form



**DOUGLAS
COUNTY
FAIR**

Exhibitor Information - Name: _____
 Age (As of Jan 1, 2026 - only if under 18): _____
 Parent/Guardian's Name (only if under 18): _____
 Address: _____ City: _____ State: ____ Zip: _____
 County: _____ Phone: _____ Email: _____

DEPT #	DEPT NAME	DIV #	DIV NAME	CLASS #	CLASS NAME	# OF ENTRIES

Registration accepted day of check-in. Bring this form or fill out day of registration.
 Use as many sheets as needed. By signing below, I shall fully agree to follow all Rules,
 Regulations, IAFE Code of Ethics and Schedules of the Douglas County Fair.

Youth Signature (if applicable) _____ Date: _____
 Parent/Guardian Signature: _____ Date: _____