

# **Douglas County Fair**

## **Static Exhibit Entry Form**



**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: \_\_\_\_\_

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: \_\_\_\_\_