

# Douglas County Fair

## Static Exhibit Entry Form



**DOUGLAS  
COUNTY  
FAIR**

Exhibitor Information - Name: \_\_\_\_\_  
 Age (As of Jan 1, 2025 - 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: \_\_\_\_\_