



**Independent Exhibitor Application
Applications due January 31, 2019**

Exhibitor Name: _____ Date of Birth: _____

Exhibitor Phone Number: _____ Exhibitor E-Mail Address: _____

Exhibitor Mailing Address: _____

Exhibitor Physical Address: _____

Species Exhibitor Desires to Show: _____

Have you previously been affiliated with either 4-H/Grange/FFA? Yes_____ No_____

If yes, please list all actual clubs/chapters: _____

Supervising Adult Name: _____

Supervising Adult Phone Number: _____

Supervising Adult Cell Phone Number: _____

Supervising Adult Mailing Address: _____

Supervising Adult Physical Address: _____

Relationship to Exhibitor: _____

Comments: _____

Supervising Adult must be over 25 years of age and on the grounds at all times and available on a 15 minute call during Fair time activities.

Age of independent exhibitors is determined as of January 1, 2019.

Accepted: _____ Rejected: _____ Date: _____ By: _____