

PLEASE PRINT OR TYPE CLEARLY

# JUNIOR ENTRY

(Fill In) Club/Chapter/School

Exhibitor Name: \_\_\_\_\_

44th DAA

4-H \_\_\_\_\_

Mailing Address: \_\_\_\_\_

COLUSA COUNTY FAIR

FFA/Ag Mech. \_\_\_\_\_

1303 10TH STREET

City, State, Zip: \_\_\_\_\_

COLUSA, CALIFORNIA 95932

Open Jr. \_\_\_\_\_

(530) 458-2641

Phone Number: \_\_\_\_\_

www.colusacountyfair.com

Age of Exhibitor as of Jan 1st.: \_\_\_\_\_

Birth Date: \_\_\_\_\_

*Consult Premium Book for Division, Class Numbers, Entry Fees, and Entry Closing Dates*

Leave Blank	4-Hers—State year in Project	Division	Class	Description	Entry Fee

**44TH DAA COLUSA COUNTY FAIR RELEASE AND WAIVER OF LIABILITY AGREEMENT**

I of the project with authorization to act as agent and to bind the owners of the property in all matters herein. I have read, understand and agree to abide by all the rules and regulations governing the fair entries as published in the official Exhibitors Guidebook. I agree to indemnify, defend and save harmless the fair, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all persons in connection with my participation in the fair and from any and all claims and losses accruing or resulting to my person, firm or corporation who may be injured as result of my participation

Exhibitors Signature: \_\_\_\_\_

Required Parent/Guardian Signature \_\_\_\_\_

I verify that the exhibitor named on this entry form is a member in good standing, has completed this project and is eligible to compete in the Colusa County Fair.

Advisor/Leader/Teacher Signature \_\_\_\_\_

# of Entries	
Total Fees	
Receipt #	