Agricultural Exhibition Center

Entry Form

Name: Mailing Address:			Date:	- la maria
			City:	
State:	Zip):	Phone:	A.D. IBAS
New entry	or change in a	ddress: Y	N If Junior, enter age:	
Please use	e a separate fo	rm for each po	erson entering. This form may be duplica	ted.
DEPT	CLASS	LOT	DESCRIPTION	
				
				
				
my entry		es must be po	be accepted and I have read the rules of ostmarked by August 15 th . t also sign.	Oxford Fair and certify that
Signed:			Date:	

Return to: Oxford Fair, Agricultural Exhibition Center, PO Box 193, Norway, ME 04268