Entry Form

Name:_____

Address:_____

City:_____

State:_____ Zip Code:_____

Phone:_____

Email:_____

Signature:_____

Age Divisions (check one)

Youth
___ 8 & Under
___ 9-14
___ 15-19

___**Adult** (20-59)
___**Senior Citizen** (60-79)
___**Super Seniors** (80+)
___**Special Citizens** (having a disability)

DEPARTMENT LETTER & CLASS NUMBER	DESCRIPTION (as written in Fair Catalog)