



**EXHIBIT • EXHIBIT • EXHIBIT**

## *Exhibit Entry Blank*

**Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone (    )** \_\_\_\_\_

**E-mail** \_\_\_\_\_

\*\*\*Exhibitors may use one form to input multiple categories\*\*\* **EXHIBITOR NUMBER** \_\_\_\_\_

DEPARTMENT	DIVISION	LOT	NUMBER	DESCRIPTION	QUANTITY

I have read and understand, consent to, and agree to abide by the IAFE (International Association of Fair and Expositions) National Code of Show Ring Ethics as stated in the premium list of this event. I understand the Fisher Community Fair and Horse Show is not responsible for damaged, lost or stolen articles of goods. I hereby, for heir's executors, administrators, and myself waive any and all claims I may have for damages against the Fisher Community Fair and Horse Show, it's directors and officers, for any injuries suffered by me in connections with the Fisher Fair.

\_\_\_\_\_  
Signature of Exhibitor

**FISHER COMMUNITY FAIR**

\_\_\_\_\_  
Date