Chowchilla-Madera County Fair
Award Sponsorship

Company/Organization Name: _____

Contact Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone #: _____ **Email:** _____

Sponsorship to Read: _____

Class No.	Class Name	Amount
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
	Total Due:	$_____

If you would like to sponsor additional awards please contact the Fair Office for a list of available awards 559-665-3728. Thank you for your sponsorship.

FAIR OFFICE USE ONLY

Paid: $_____ **Date:** _____ **Receipt #:** _____