NO REFUNDS AVAILABLE

KANSAS STATE FAIR
SEPTEMBER 7-16, 2018

Floriculture

Entry Form - must be postmarked by August 15

Mail form to: Kansas State Fair, Competitive Exhibits Department, 2000 N. Poplar, Hutchinson, KS 67502
(620) 669-3881 or (620) 669-3621

***Required Fields**

*First Name:_____*Last Name:_____

*Address_____*City_____*State_____*Zip_____

**Telephone _____ Social Security #: _____

E-mail Address: _____ ***E-mail confirmation is only provided if you process your entry online.**

Admission tickets ordered on this form will be available for pick up once your exhibits have been delivered. Please see website or ask clerk for instructions. To receive tickets, exhibitor must show at least (1) item from their entry form. Kansas State Fair has a "No Refund" policy. <u>For any reason, an exhibit is not received, tickets will not be issued and refunds will not be given.</u>

Gate Admission Tickets: One ticket required per person, per day.

★ **LIMIT (3) DISCOUNTED TICKETS PER EXHIBITOR IF SUBMITTING A PAPER ENTRY FORM. IF REGISTERING ONLINE, YOU MAY PURCHASE UP TO (6) DISCOUNTED TICKETS PER EXHIBITOR.**

Exhibitor Admission Tickets *(for participants only)* (By Aug 15):……LIMIT 3……_____x $3.00 each $_____
No exhibitor gate admission tickets can be ordered after **<u>August 15.</u>**

Late Entry Fee (August 16-25):……entry fee is $ 5.00 per Item . $_____
Late Entry Fee (After August 25):……entry fee is $25.00 per Item $_____

****HANDLING FEE (REQUIRED) ……$_____ 1.00 ___**

TOTAL REMITTANCE (ALL FEES MUST BE PAID PRIOR TO AUGUST 15TH . NO REFUNDS AVAILABLE) ..... $_____
Please send check or money order made out to the Kansas State Fair or fill out the credit card information below.

MasterCard____Visa _____Discover _____Exp. Date ____/____Number __ __ __ __ / __ __ __ __ /__ __ __ __ /__ __ __ __

3 digit security code_____Cardholder's Name_____ Signature _____

Cardholder's Address: _____ City/State: _____Zip_____

Entry Forms are also available on the web at www.kansasstatefair.com.

DIVISION NUMBER	CLASS NUMBER	CLASS DESCRIPTION (Use Exact Wording from Exhibitor Handbook)	ITEM DESCRIPTION

(FAIR USE ONLY)

Date Rec'd _____ Amount $_____ Entered by : _____

Check # _____ Receipt # CE-_____ Date Entered:_____

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