NO REFUNDS AVAILABLE

# KANSAS STATE FAIR

## SEPTEMBER 7 - 16, 2018

STALL RESERVATION FORM

Entry Form - must be postmarked by August 15

Mail form to: Kansas State Fair, Competitive Exhibits Department, 2000 N. Poplar, Hutchinson, KS 67502
(620) 669-3614 or (620) 669-3623

**PREMIUMS ARE PAID TO THE OWNER "NOT" THE EXHIBITOR. ALL PAPERWORK MUST BE FILLED OUT WITH THE OWNER'S INFORMATION**

***Required Fields**

Farm Name: _____ *Breed Showing: _____

*First Name:_____ *Last Name: _____

*Address_____ *City_____*State_____*Zip_____

*Telephone_____ Social Security #: _____

Email Address_____ Stalling Note: _____

_____

| Stalling | Cost | X | # Stalls | Total |
|---|---|---|---|---|
| Day of Show ONLY | $15.00 | x | | |
| 1 Day Show (arriving day prior / leaving day after show) | $30.00 | x | | |
| 2 Day Show (arriving day prior / leaving day after shows) | $45.00 | x | | |
| Pinto & 2 Day Paint Show (entering all 3 days) | $60.00 | x | | |
| Jump Out (tied out to trailer) **required if not stalling** | $ 5.00 | x | | |
| Late Fee (Aug. 16-25) | $ 5.00 | x | | |
| Late Fee (After Aug 25) | $30.00 | x | | |
| **Additional Purchases** | **Cost** | **X** | **Quantity** | **Total** |
| Wood Chips | $ 6.50 | x | | |
| Straw | $ 4.00 | x | | |
| Exhibitor Tickets - **10 Ticket Limit** - by Aug 15 | $ 3.00 | x | | |
| Additional Advance Tickets - by Aug 15 | $ 7.00 | x | | |
| Parking Hang Tag – per day / per tag | $10.00 | x | | |
| Handling Fee (required per exhibitor) | $1.00 | x | 1 | $1.00 |

**Daily Hangtag--Circle Dates Needed – can only park on grounds when showing** *Sept. 7 8 9 10 11 12 13 14 15 16*

**Tan Lot is reserved for vehicles pulling horse / livestock trailers only. Tow vehicle must remain hooked to trailer.**

**Total Remittance (No Refunds) $_____**

Please send a check or money order made out to the Kansas State Fair to the above address 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: _____

Date Rec'd_____ Date Entered _____ Entered By _____ Payment _____