



# Exhibitor Entry Form

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## JUNIOR CLASS

Consult Premium Book for Entry Deadlines

Make Payments to: NWSF. Mail to:

NWSF Entry Department, 225 Edward St., Chippewa Falls, WI 54729

Name of approved 4-H Club, FFA, FHA Chapter: \_\_\_\_\_

Signature of Club Advisor: \_\_\_\_\_

Exhibitor: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Farm PREMISE ID-REQUIRED for all animals entered in Departments B01-B08 \_\_\_\_\_

YQCA # \_\_\_\_\_ (Required for all exhibitors showing in B1-B8. Please mail/fax/e-mail a copy of the certificate to the fair office.)

I agree to abide by the Northern Wisconsin State Fair Code of Ethics as stated in Premium Book

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fees				
Early Bird Exhibitor Fee		\$10.00	\$	
Exhibitor Fee after June 13th		\$15.00	\$	
Additional Season Passes limit 4	# _____ X	\$15.00	\$	
Shavings/Bale	# _____ X	\$5.00	\$	
Mailed Entry Ticket Postage Fee		\$1.00	\$	

**Exhibitor fee includes one admission season pass**

Includes WI Sales Tax  
No Refunds or Returns

\$ \_\_\_\_\_ Amount Enclosed

Dept	Class	Lot	Article or Animals AS LISTED IN PREMIUM BOOK

Additional entries may be listed on back of this form.

