

# Walker County Fair Association

## Non-Livestock Entry Form

### Horticulture

Check # \_\_\_\_\_

Cash \_\_\_\_\_

Total \$ \_\_\_\_\_

Please print clearly:

Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_  
First Last month /day/year

Address \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

Organization: Walker Co 4-H New Waverly 4-H NWFFA HFFA H'ville FCCLA NW  
FCCLA

School \_\_\_\_\_ Grade: 3 4 5 6 7 8 9 10 11 12

Parent/Guardian's Name (print) \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Social Security # \_\_\_\_\_

### **Please mark all categories you plan to enter at the fair (\$5.00 per entry):**

★ *Immediately following the judging all FIRST PLACES in their CLASS will be interviewed to determine the BEST OF SHOW. Exhibitors must be present for the interview to qualify for the Best of Show.*

\_\_\_ Creative Container      \_\_\_ Foliage Hanging Basket      \_\_\_ Flowering Hanging Basket

\_\_\_ Decorative Container      \_\_\_ Foliage 6" Pot      \_\_\_ Flowering 6" Pot

\_\_\_ Bedding Plant      \_\_\_ Vegetable Plant

### **Minor's Release**

If a minor, this release must be signed by a parent or guardian.

I consent and agree that it is satisfactory for my son or daughter to participate in the Walker County Fair. I will not hold the Walker County Fair Association, it's officers, directors, or any other person connected therewith, either individually or collectively, responsible for bodily injury or any other damage or loss suffered while a participate in the Fair.

**THIS ENTRY IS SUBJECT TO THE GENERAL RULES AND REGULATIONS OF THE WALKER COUNTY FAIR ASSOCIATION AND CONFORMS TO STATE REGULATIONS CONCERNING ACADEMIC REQUIREMENTS FOR ENTRANTS.**

\_\_\_\_\_  
Signature of Parent/Guardian      Date \_\_\_\_\_  
Month    Date    Year

\_\_\_\_\_  
Career and Technology Teacher or County Agent