

Fair Livestock Exhibitor Gate Pass Form

PRE-SALE is open April 1st—July 31st. This form, accompanied with payment in full, must be delivered to the office or postmarked by July 31st. Passes will be available for purchase after that date on August 5th at the Exhibitors Office.

Livestock Exhibitor Season Gate Pass Pre-Sale \$10 each—limit of 3 per Exhibitor*.

Livestock Exhibitor Season Gate Pass after July 31st \$20 each—limit of 3 per Exhibitor.*

Exhibitor Gate Pass Guidelines:

Livestock exhibitors are entitled to **three (3)** season gate passes. Any additional passes must be purchased through the Fairgrounds Main Ticket Office or online www.wallawallafairgrounds.com. If you do not purchase the full amount of allowed passes, you will be able to purchase the remaining passes at a later time.

*** ALL SEASON PASSES PURCHASED DURING PRE-SALE WILL BE \$10 PER PASS.**

*** ALL SEASON PASSES PURCHASED AFTER PRE-SALE, JULY 31ST, WILL BE \$20 PER PASS.**

⇒ **Livestock exhibitors who also enter Non-Livestock exhibits may either choose Non-Livestock or Livestock passes, but may not receive both.**

⇒ Non-Livestock Exhibitor Passes will be available August 27th, Exhibit Entry Day, in the Community Building and in the Exhibitors Office beginning August 28th.

IF YOU PURCHASED A CAMPING SPOT, YOUR GATE PASSES WILL BE MAILED OUT WITH YOUR HAUL-IN CREDENTIALS. ALL OTHER PASSES MUST BE PICKED UP AFTER AUGUST 5TH AND PRIOR TO 1:00 P.M., WEDNESDAY, AUGUST 31ST —OPENING DAY OF FAIR. If passes are not picked up prior to that time, you will have to purchase a gate pass to gain access to the Exhibitors Office.

Parent(s) Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

***** ALL PRE-PURCHASED PASSES WILL BE VERIFIED AFTER ENTRY DEADLINE DAY, AUGUST 5TH. PASSES PURCHASED UNDER EXHIBITORS THAT DO NOT HAVE AN ENTRY ON FILE AFTER THAT DATE WILL BE VOID.**

Exhibitor Name: _____ Number of Season Passes _____ x \$ _____ = _____

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Exhibitor Name: _____ Number of Season Passes _____ x \$ _____ = _____

Exhibitor Name: _____ Number of Season Passes _____ x \$ _____ = _____

Exhibitor Name: _____ Number of Season Passes _____ x \$ _____ = _____

Total Number of Passes _____ x \$ _____ = _____



OFFICE USE ONLY

Received: _____

Cash/CK/CC: _____

Amount: _____

No refunds after July 31st

TOTAL ENCLOSED: \$ _____

If you would like to pay with a credit or debit card, please bring the form by the office during normal business hours. No phone in orders.

Mail completed form with payment to:

Exhibitor's Office
P.O. Box G
Walla Walla, WA 99362