

**DEPARTMENT 11-1 9,21, 22, 23**  
**ENTRY FORM**

Mail form to:  
West End Fair Association, Inc.  
P.O. Box 115  
Gilbert, PA 18331

Deadline: July 18  
**\$4.00 per person registration fee required.**

Name: \_\_\_\_\_ Age (if student): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Township you live in: \_\_\_\_\_

- Please check box if you are a new exhibitor.
- Please check box if your address or phone number has changed.

**I am a resident of Monroe County and I agree to be bound by the rules and regulations of the West End Fair and submit the following entries:**

Exhibitor's Signature \_\_\_\_\_

DEPT.	SECTION	CLASS	DESCRIPTION OF ITEM (FROM PREMIUM BOOK)
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