

First Name _____ Last Name _____

Additional Entries

	Department	Division #	Class #	Age Group	Detailed description of item	Entry fee
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

Total Entry Fees \$ _____

Exhibitor Wristband
 _____ x \$45 ea. = \$ _____

Exhibitor Lot Parking Pass
 _____ X \$45 ea. = \$ _____

Complimentary Day Pass \$ 0

Total Due \$ _____

We accept cash, check, or debit/credit card.
 Make check payable to: *Colorado State Fair*