DuQuoin State Fair

General Entry Blank

Closing Date For Entries August 1, 2016 - Late Entries and Contest August 10, 2016

Use Separate Entry Blank for Each Department

Dept.	Div.	Class No.	Description - Use the wording in the Premium Book

CONDITION OF ENTRY

By signing this form, I certify that I have received and read the contents of the Premium Book and that I will abide by all applicable rules contained therein and all other rules relating to the DuQuoin State Fair and the laws and regulations of the State of Illinois.

_____

Parent/Guardian and Exhibitor Date

Exhibitor's Name _____

Address _____

_____

City State Zip Code

_____

Telephone _____

Cell Phone _____

County _____

_____

Social Security Number

E-MAIL _____

Junior Exhibitor's Age _____

_____ Junior.....($1.50)_____

_____ Entry Fee.....($3.50)_____

_____ Exhibitor Pass .....($30.00)_____

_____ Late Entries .....($4.00)_____
(per single item)

TOTAL_____

For Office Use Only_____

_____

Receipt # Exhibitor #

Make Check Payable To: Du Quoin State Fair

Mail Entries To: Du Quoin State Fair, 655 Executive Dr., Du Quoin, IL 62832

In accordance with the Americans With Disabilities Act, any attendee requiring a reasonable accommodation should notify us of their needs by August 22, 2016. DQ2002

IMPORTANT NOTICE: This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under 30 ILCS 120. Failure to provide this information shall prevent this form from being processed. This form has been approved by the State Forms Management Center. IL406-0562(Rev. 5-12)