Dunnville Agricultural Society – Exhibitor Entry Form

Name_____

Address_____

Postal Code_____ **Phone#**_____ **Date**_____

Please fill out and return before the following dates:
Sheep / Goats - Wednesday August 17/11, Homecraft / Hay / Seeds / Grains - Friday August 12/11
Heavy / Light Horse - Thursday August 18/11 **Please check RULES at beginning of each section.**

Return form by mail to: Dunnville Agricultural Society, Box 181, Dunnville, ON, N1A 2X5
OR
Return to The Fair Office in Chamber of Commerce Building, 231 Chestnut Street, Dunnville
Phone# 905-774-8199 Fax 905-774-9281 Attn. Pat Email: das@linetap.com

MEMBERSHIP FEE ENCLOSED _____ **RETAINED MEMBER** _____ **EXHIBITOR#** _____

Personal information on this entry form will be used for processing payment of prize money and mailing prize lists. By compiling/submitting this form, the registrant consents to information being used by the said parties for the said purposes. If the Dunnville Agricultural Society needs to use the personal information for any other purpose, it will notify the registrant, and, if necessary, obtain a new consent. For any questions call (905) 774-8199.
I hereby enter the following entries at my own risk and subject to the rules of the Dunnville Agricultural Society. I agree to indemnify and hold harmless the Dunnville Agricultural Society, their members, agents and employees from and against all claims, demands, losses, costs, damages, actions, suits or proceedings by any third parties that may arise out of, or may attribute to, all operations performed or carried out by myself, my agents, employees or servants or anyone for whose acts they may be held liable, howsoever caused.

Exhibitor Signature _____ **Guardian Signature**_____
(If exhibitor under 18.)

Proof of insurance of no less that $1 million coverage – Required by all animal classes.

Policy # _____ **Co. Name** _____ **Expiry Date**_____

Class#	Section	Describe exhibit – (Use prize list wording only.)

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Name:_____ **Page#** _____