

The Afton Fair Floral Hall Entry Form		Office Use Only			
		Entry Fee Paid			
Circle one Adult or Youth		Exhibitor Number			
Complete Name and Address are required. Please fill out in ink.					
Exhibitor Name:					
Address:					
City:					
State:		Zip Code			
Exhibitor Phone Number:					
Exhibitor E-mail Address:					
I hereby authorize you to enter the following articles in my name to compete for premiums according to rules and regulations. Place Department, Class and Division Number of each article in the left columns and on the same line with the name of the article.					
Dept.	Section	Class	Name of Exhibit or Article	Premium	Award
Send to: Afton Fair Floral Hall, PO Box 15, Afton, NY 13730					

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