# Open Class Entry

Union County Fair

Exhibitor No. ____________________ Date: ____________________

Name ______________________________________________

Address ______________________________________________

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Phone ______________________________

| Dept | Entry # | Class # | Description | Fee |
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| | | | Ticket | |
| | | | Total | |

I agree to hold U.C.A.S and its agents harmless of any liability to me and/or property. I also agree that U.C.A.S may use pictures and information about me and/or my entries in their publications and news releases.

Signature: ______________________________________________