

**KENTUCKY STATE FAIR
AUGUST 20-30, 2009
ENTRY DEADLINE JULY 1
GENERAL ENTRY FORM**

<i>For office use only:</i>	
Amount received	_____
IRE:	_____
Exh. Ticket	_____

Please use a separate entry form for each exhibitor. Make copies of this form if needed. (It is not necessary to use pink paper for your copies.) Please type or print clearly. Do not send cash: Checks, money order or credit card only. **You may now enter the following departments online at www.kystatefair.org: Antiques, Culinary, Fine Arts, Hobbies, Textiles, Homebrew Beer, Plants & Flowers, Tropical & Native Fish, Homemade Wine, Bees & Honey, Dairy Products, Egg Show, Field Seed & Grain, Fruits & Nuts, Ky. Country Ham Show, Tobacco and Vegetables & Melons.** Online entries are subject to the same rules, fees and deadlines. **A credit card is required.**

Mail to: KENTUCKY STATE FAIR ENTRY DEPARTMENT, P.O. Box 37130, Louisville, KY 40233-7130
Phone: (502) 367-5190; Fax: (502) 367-5198 ~ Email us at KFECEntry@ksfb.ky.gov.

Name _____ Address _____

City _____ State _____ Zip _____ Daytime Phone _____

***NO PRIZE MONEY WILL BE AWARDED UNLESS A SOCIAL SECURITY OR TAX IDENTIFICATION NUMBER IS PROVIDED IN BOX AT BOTTOM OF PAGE. If you do not wish to provide this information, write "refused" in the blank.**

I understand that these entries are subject to the rules governing exhibits at the Kentucky State Fair as published in the premium list of 2009 by which I hereby agree to be governed. I further declare that all statements made in connection with these entries are true. I certify that I made or produced all items listed (except for entries in Antiques or Tropical Fish).

Exhibitor's Signature _____
(Required)

PHOTO AUTHORIZATION: I hereby grant permission for photographs or video images of myself, or my minor child whose name appears as entrant on this form, for general uses which may include news, agricultural publications or websites, educational uses, and state fair & expositions promotional materials and websites. I understand that my signature is voluntary, but that failure to sign may inhibit or prevent use of my image, or my child's image, in news, agricultural, educational and state fair & exposition publications and websites. Person signing must be entrant or parent/guardian if entrant is child under 18.

Signature: _____ Date: _____

ENTRY FEES

Commercial Wine \$60.00 per department

Adults \$8.00 per department Check here if Adult Exhibitor _____

Juniors \$4.00 per department (anyone who has not reached their 18th birthday by August 1, 2009) Check here if Junior Exhibitor _____

Seniors \$6.00 per department (age 55 & over by August 1, 2009) Check here if Senior Exhibitor _____

DO NOT SEND FEE FOR EACH ITEM OR DIVISION. ENTRY FEE IS PER DEPARTMENT, NOT ITEM. (Example: Fruitcake and Brownies are both exhibited in the Culinary Department, so one department fee is charged.)

LATE ENTRIES postmarked after July 1 - All exhibitors, all departments pay \$15.00 per department, except for Commercial Wine. Commercial wineries pay \$67.00 late fee. All late entry forms must ARRIVE at the Fair office by July 10.

Exhibitor Tickets - \$22.00 per book of eleven. Limit of two books. Further information will be sent with tags. No one will be admitted to the grounds during the Fair without exhibitor ticket or admission fees.

SUMMARY:

By July 1:

OR LATE ENTRIES (Must arrive by July 10):

_____ DEPARTMENTS @ \$ 60.00 = _____	_____ DEPARTMENTS @ \$15.00 = _____
_____ DEPARTMENTS @ \$ 8.00 = _____	_____ DEPARTMENTS @ \$67.00 = _____
_____ DEPARTMENTS @ \$ 6.00 = _____	
_____ DEPARTMENTS @ \$ 4.00 = _____	
_____ EXHIBITOR TICKET BOOK(S) @ \$22.00 per book (Limit 2) = _____	

GRAND TOTAL OF FEES & TICKET BOOKS _____

PLEASE LIST ENTRIES ON BACK OF THIS PAGE.
USE THE DIVISION AND CLASS NUMBERS IN THE PREMIUM LIST AND GENERAL RULES BOOK.

<input type="checkbox"/> VISA	
<input type="checkbox"/> MasterCard	Card Holder Name _____ Phone Number _____
<input type="checkbox"/> American Express	Card Number _____ Expiration Date _____
<input type="checkbox"/> Discovery	Billing Address _____ Card Holder CVV# _____ (3 digit number on back of card)
TOTAL _____	City _____ St _____ Zip _____
Email Address (for receipt confirmation) _____	
Exhibitor's Email Address _____	Exhibitor's Social Security or Federal Tax Identification Number _____ (Required For Payment Purposes)*

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A service charge of \$25.00 will be assessed on all returned checks and declined credit or debit cards.

