Updated 5/26

EXH.#_____(Office Use)

ONE SHEET PER CONTESTANT

Age_____ **Year 20____**

Canning Show Registration Form

First and Last Name: _____ Address: _____

Phone Number: _____ _____

Email: _____

Please Print Clearly (5 entries = Week Long Pass)

PLEASE ATTACH ALL COPIES AND SOURCES OF RECIPES TO FORM WHEN ENTERING.

	Category Name & Number (ex. Jams #6)	Class Name & Number (ex. Strawberry #74)	Brief Item Description and Date of Recipe
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

I hereby release the Warren County Farmers' Fair Association Inc., its directors, and all committee members from any and all responsibility or liability for injury or damage to any entry or exhibit resulting from or due to the participation in this exhibit. I also release and agree to indemnify the Warren County Farmers' Fair Association Inc., its directors, and all members against any damage claim, legal proceeding, or a judgment arising out of participation in this show including the entry, transportation, or exhibition of the listed entries or exhibits at said Fair. I further agree to hold harmless the said Warren County Farmers' Fair Association Inc., its directors, and all committee members from any claim or suit for injury, damage or blame resulting from participation in this show. I agree not to remove any of my entries before the designated pick up time and date but will pick them up as designated in the rules. **I have read this disclaimer and agree to abide by it.**

Signature:_____ Date: _____

Parent/Guardian if under 18: _____ Passes Received: _____