

WAHKIAKUM COUNTY FAIR
P.O. Box 1
Skamokawa, WA 98647

EXHIBITOR NUMBER, (assigned by Fair)_____

JR. _____Adult_____GA_____

Dept.____Division_____

Full Name_____

Mailing Address_____

Phone:_____

Email:_____

Fill out Completely all applicable fields

Class	Lot	Description per Premium Book	Animal Birth Date	Name, ID or Tag #	Sex	1	2	3	Other

Total Number of animals entered_____

Number of pens needed._____

Total Premium_____

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