



SCHOOL PROJECTS ENTRY FORM

THIS FORM MAY BE PHOTOCOPIED

Entries due August 28, 2009 by 6:00 pm

Tulare County Fair
215 Martin Luther King Jr. Ave
Tulare CA 93274
(559) 686-4707
www.tularefair.org

	DIVISION	CLASS	DESCRIPTION OR TITLE
1			
2			
3			
4			
5			
6			
7			
8			

FIRST TIME EXHIBITOR _____ HAVE PREVIOUSLY ENTERED _____ ** AFTER RECEIVING THIS ENTRY FORM, THE TEACHER WILL BE RECEIVING AN EMAIL REQUIRING A CLASS LIST SENT TO EXHIBITS@TULAREFAIR.ORG.	GRADE IN SCHOOL (as of Sept. 1, 2009) _____ _____ SCHOOL NAME	_____ PRINTED NAME OF TEACHER
	I certify that this entry is the project of the exhibitor and is eligible to be shown in accordance with the rules of this show. The teacher accepts full responsibility for the entries.	_____ SCHOOL MAILING ADDRESS
	_____ TEACHER SIGNATURE	_____ CITY AND ZIP PHONE #
		_____ EMAIL ADDRESS (MANDATORY)



