

## Washington County Fair Commercial Exhibitor Form

Business Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Preferred Location (not a guarantee):

4-H Hall

\_\_\_\_\_ Single Space \$125  
\_\_\_\_\_ Double Space \$250

Commercial Exhibit Building

\_\_\_\_\_ Single Space \$125  
\_\_\_\_\_ Double Space \$250

Outside-Equipment

\_\_\_\_\_ Double Space \$250

Make checks payable to: Washington County Fair Association

Mail payment to: Washington County Fair Association  
Attn: Commercial Exhibits  
PO Box 485  
Washington, IA 52353

**Office use only:**

Check # \_\_\_\_\_ Cash: \_\_\_\_\_

Amount: \_\_\_\_\_ Initials: \_\_\_\_\_