

Washington County Fair Commercial Exhibitor Form
July 16-21, 2017

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: _____