## **TEACHER ENTRY FORM**

Please Check One:

**JUNIOR EXHIBITS** 

MAIL ENTRY TO:
SAN BENITO COUNTY FAIR
attn: ENTRY OFFICE

PO BOX 780

OMiddle School 6-8 OHigh School 9-12

**Grade School K-5** 

TRES PINOS, CA 95075

	Onigii action 9-12										
	Entry form must be received or postmarked no later than August 25th. Entries not picked up become property of San Benito County Fair										
	Division Number	Class Number	Student I	Name	Grade	Birth Date	Brief	Description	Entry Fee		
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10.											
11.											
12.											
Teachers Name:					Total Cl	assroom Entries:	Total Entry Fees:				
Sch	ool:										
Mailing Address: Check #:											
City:			State:	Zip:			Cash:				
Cell	ell Phone: Email:			Receipt #:		Total Paid:					
				HOLD HARMLES	S STATEM	ENT - READ	AND SIGN				
The exhibitor agrees to defend, indemnify and hold harmless the 33rd District Agricultural Association (fair), the County of San Benito and State of California from and against any liability, claim loss or expense (including reasonable attorneys fees) arising out of any injury or damge which is caused by, arises from or is any way connected with participation in this program or event, expecting only that cuased by the sole act of negligence of the fair. The fair management shall not be responsible for accidents or losses that may occure to any exhibitors or exhibits at the fair. The exhibitor (or parent or guardian of a minor) is responsible for any injury or damage resulting from exhibitors participation in the program or event. This includes any injury to others or to the exhibitor or to the exhibitor's property.											
x	X Date: Date:										

	Division Number	Class Number	Student Name	Grade	Birth Date	Brief Description	Entry Fee
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