

# Berlin Fair

## Entry Form – Premium Sheet

Must be submitted by noon on first day of fair.

Exhibitor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Age: \_\_\_\_\_

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

**\*\*No premium checks are mailed. See Pg. 8 of the fair book for details.\*\***

	Department Number	Section Number	Class Number	Class Description
1.				
2.				
3.				
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15.				
16.				

\_\_\_\_\_ For the financial benefit of the Berlin Fair, I choose not to receive any premium payment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date