

# THE NEW JERSEY STATE FAIR® / SUSSEX COUNTY FARM & HORSE SHOW DEPARTMENT 82 – OPEN VEGETABLE SHOW ENTRY FORM



PLEASE TYPE OR PRINT CAREFULLY! FILL IN EVERYTHING  
INCOMPLETE, INCORRECT AND/OR UNREADABLE FORMS WILL BE RETURNED.

Send completed form to: NJ State Fair®/Sussex County Farm & Horse Show; PO Box 600, Augusta, NJ 07822

Exhibitor Name [one form/exhibitor] \_\_\_\_\_ Age (if under 14) \_\_\_\_\_

Address \_\_\_\_\_ New Address?  Yes  No

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Did you exhibit last year?  Yes  No

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Office use:

<b>For rules &amp; more info go to: <a href="http://www.eieiosussex.com">www.eieiosussex.com</a></b>			
<b>Entry fees will be charged as follows for sections VEG, HER, GAR and BAS:</b>		Total # Entries: VEG,HER,GAR,BAS _____	
<b>FLAT FEE per entry form</b> <b>(Children: CHI-CHB are FREE) \$10.00</b>	<b>SCA – Scarecrow Contest</b> Fee - per scarecrow entry	<b>\$ 5.00</b>	<b>FLAT FEE for VEG, HER, GAR, BAS sections</b>
<i>An entry form is <u>per exhibitor</u>. Each exhibitor must enter their own form.</i>	<b>ZUC – Zucchini Contest</b> Fee - per zucchini	<b>\$ 3.00</b>	<b>CRO Fee \$5.00 each</b>
	<b>CHI &amp; CHB (Children)</b>	<b>FREE</b>	<b>ZUC Fee \$3.00 each</b>
Check the day you intend to bring in your entries: <input type="checkbox"/> Friday <input type="checkbox"/> Saturday	<b>SCARECROW ENTRY will be brought in on</b> <input type="checkbox"/> Friday <input type="checkbox"/> Saturday		<b>Total Entry Fees Enclosed</b>
			<b>Payment method</b> <input type="checkbox"/> Cash <input type="checkbox"/> Check made payable to NJ State Fair

## OPEN VEGETABLE SHOW ENTRIES ONLY

Dept #	Section Code	Class Number	Class Name	
82	SCA	<input type="checkbox"/> 1 or <input type="checkbox"/> 2	Scarecrow Contest	Check if entering in SCA <input type="checkbox"/>
82	ZUC	1	Great Zucchini Contest	Check if entering in ZUC <input type="checkbox"/>
Dept	Section Code	Class Number	Class Name	Variety Name
1	82			
2	82			
3	82			
4	82			
5	82			
6	82			
7	82			
8	82			
9	82			
10	82			
11	82			
12	82			
13	82			
14	82			
15	82			

Use additional space on back if needed.

I Do **or**  I Do **Not** wish to receive ribbons  
\*\*\**(if left blank, no ribbons will be issued)*\*\*\*

I Will **or**  I Will **Not** pick up my exhibits at the end of the fair  
\*\*\**(if left blank, your exhibits will be Donated to a Local Food Pantry)*\*\*\*

Check here if entries are continued the back

Ribbons will be distributed at the end of the show along with premium money.

If picking up your exhibits, they must be picked up between **12 noon – 2 pm on Sunday August 9**. After that time, all remaining exhibits will be donated.

I have read and agree to the rules and regulations as set forth by the IAFE. I agree to leave my exhibit(s) on display until Sunday August 15<sup>th</sup> or my premiums will be forfeited.

Date \_\_\_\_\_

Signature \_\_\_\_\_

	<b>Dept #</b>	<b>Section Code</b>	<b>Class Number</b>	<b>Class Name</b>	<b>Variety Name</b>
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