

# 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>			
Entry fees will be charged as follows for sections VEG, HER, GAR and BAS: Entry forms after July 15 will NOT receive a pass to the fair.		Total # Entries: VEG,HER,GAR,BAS	_____
<b>FLAT FEE per entry form \$10.00</b>	<b>SCA – Scarecrow Contest</b> Fee - per scarecrow entry	<b>\$ 5.00</b>	FLAT FEE for VEG, HER, GAR, BAS sections <b>does not apply to ZUC or SCA</b> <b>\$ 10.00</b>
<i>An entry form is per exhibitor. Each exhibitor must enter their own form.</i> Entry forms must be <b>POSTMARKED by July 15</b> to be eligible to receive passes.	<b>ZUC – Zucchini Contest</b> Fee - per zucchini	<b>\$ 3.00</b>	
		<b>CHI &amp; CHB (Children)</b>	<b>FREE</b>
Check the day you will be bringing 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>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: VEG, HER, GAR CHI, CHB, BAS	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 2<sup>nd</sup> page 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 Local Food Pantries)*\*\*\*

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 14<sup>th</sup> or my premiums will be forfeited.

Date \_\_\_\_\_ Signature \_\_\_\_\_

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 **12:00 noon – 2 pm on Sunday August 14.** After that time, all remaining exhibits will be donated.

	<b>Dept #</b>	<b>Section Code: VEG, HER, GAR CHI, CHB, BAS</b>	<b>Class Number</b>	<b>Class Name</b>	<b>Variety Name</b>
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