

Belchertown Fair Exhibit Hall Entry Form

**Mail entry form postmarked by Saturday,
September 9, 2024**

Colleen Butler
419 Chauncy Walker Street
Belchertown MA 01007
413-883-1713

or submit via email to belchertownfair@gmail.com
and receive an email confirmation

Exhibitor Number: _____

Adult

Youth Youth Age: _____

New Exhibitor

Returning Exhibitor

First Name _____ Last Name _____

Address _____

City/Town _____ State _____ Zip Code _____

Phone _____ e-mail _____

School Exhibits Only Teacher _____ # Students _____

**Only Exhibitors receiving a Blue, Red or White ribbon need to wait in line
to claim premium monies - all others do not need to check out.**

Premium money left unclaimed for 7 days will be donated to the Belchertown Fair.

TO AVOID DISQUALIFICATION, PLEASE READ DEPARTMENT REQUIREMENTS.

Entry	Dept #	Lot #	Description
Example	120	22	"Selfie" *please use the Lot description from book*
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First Name:

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