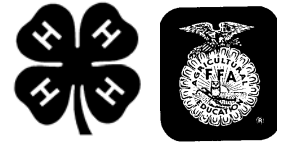




MOHAVE COUNTY FAIR PASS REQUEST

ONE REQUEST SHEET PER FAMILY

DUE: AUGUST 21, 2009



FAMILY NAME: _____

STREET ADDRESS: _____

CITY: _____

PHONE NO. _____ **STATE:** _____ **ZIP:** _____

PASSES: EXHIBITORS FREE / AGES 4 & UNDER = FREE
YOUTH \$1.00/DAY, ADULTS \$2.00/DAY
 (age 5-12) (age 13-over)

NUMBER OF DAILY PASSES REQUESTED:

| | |
|--------------------|--------------------|
| ADULT _____ | YOUTH _____ |
|--------------------|--------------------|

PASSES ARE ONLY FOR FAIR EXHIBITORS, THEIR PARENTS, AND BROTHERS & SISTERS FROM AGE 5 TO 19 YEARS OLD

Make Checks payable to: MCFA

NOTE:

PLEASE RETURN THIS FORM AND YOUR MONEY To your 4-H Community Club Key Leader or FFA Advisor for signature by August 10, 2008.

| LAST NAME | FIRST NAME | DATE OF BIRTH | CLUB OR CHAPTER | FAIR EXHIBIT AREA | YOUTH OR ADULT | # DAILY PASSES MAX. 4 / person | TOTAL \$ |
|------------------------|--------------|----------------|----------------------|------------------------|----------------|-----------------------------------|---------------|
| <i>Smith (example)</i> | <i>Smart</i> | <i>12/4/98</i> | <i>The Best Club</i> | <i>Swine, Rocketry</i> | Y | 4 | EXHIBITOR |
| <i>Smith (example)</i> | <i>Dad</i> | <i>12/8/55</i> | <i>N/A</i> | <i>N/A</i> | A | 4 | \$8.00 |
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| | | | | HANDLING FEE | | | \$1.00 |

LEADER/ ADVISOR/ INSTRUCTOR: Sign after form is complete, review and sign under last entry. Return to Cooperative Extension Office.