CHRISTMAS TREE ENTRY FORMS & FEES MUST BE RECEIVED BY 4:30, AUGUST 1, 2016
PLEASE PRINT, USE TYPEWRITER OR BALLPOINT PEN.
FORMS CAN BE DOWNLOADED OR FILLED OUT AT WWW.NYSFAIR.ORG

OFFICE USE ONLY
Exh. #_____
Fee $10.00_____
Paid _____
Check Cash Money Order
Ck #_____

CHRISTMAS TREES

MAIL FORM TO: **NYS Fair Entry Department**
581 State Fair Blvd.
Syracuse, NY 13209

Exhibitor Name_____
Farm Name _____
Post Office Address _____
City _____ State_____
Zip Code _____ County_____
Phone Number _____

Name premium is to be paid to _____
Payee's Soc. Sec. # or Federal ID # _____
The New York State Office of the State Comptroller requires state agencies to document Payee ID (social security number or federal ID number) prior to issuing payment. Failure to provide the New York State Fair with your social security number or federal identification number will result in the forfeiture of all prize money.

DEPARTMENT	SECTION	CLASS NO.	ARTICLE	DESCRIPTION

Exh. Info _____
Entry Info _____
Fee Info_____
Date Complete_____