

**ENTRY FORM FOR FLEECE TO SHAWL CONTEST  
WOOL DEPARTMENT**

**ENTRIES MUST BE RECEIVED BY 4:30 P.M., JULY 22, 2019**

**Mail Form to:** NYS Fair Entry Department  
581 State Fair Blvd.  
Syracuse, NY 13209

**ENTRY FEE: \$10.00**

NAME OF TEAM \_\_\_\_\_

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

**IT IS THE RESPONSIBILITY OF THE TEAM CAPTAIN TO CALL LINDA MILLER  
AT (315) 638-2509 TO RESERVE NO. OF CHAIRS**

PREMIUM MONEY WILL BE AWARDED TO THE CAPTAIN. CAPTAIN WILL BE RESPONSIBLE FOR DISBURSING PREMIUMS TO TEAM MEMBERS.

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.

CAPTAIN'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_ SOC. SEC. # \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_

Exh. Info	_____
Entry Info	_____
Fee Info	_____
Date Complete	_____