EXHIBIT ADUI	LT LEADER INFORM	ATION		DO NOT WRITE IN S	SHADED AREAS
Last Name	First Name		GROUP EXHIBIT	EXHIBITOR CODE	
Mailing Address	Mailing Address		ENTRY FORM	ENTRY INFORMATION <u>MUST</u> BE COMPLETE.	
City, Zip			SANTA BARBARA FAIR & EXPO 3400 Calle Real	Please read rules a information needs	
Phone Number			SANTA BARBARA, CA 93105 (805) 687-0766	Exhibit Catalogue. ATTACH SUBLIMENTAL EXHIBIT	
Email			GROUP NAME:	DOCUMENTS TO	
			Number of Students/Members:	Photocopies Accepted.	
OFFICE USE ONLY	DIVISION	CLASS	DESCRIBE ENTRY (INCLUDE COLOR AND SIZE)		AMOUNT
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
PLEASE NOTE: If you wish to have eachchild's name on entries, you must submit a list of individual names. Otherwise all entries will be listed under the "group name".					
LIABILITY - This receipt limits our liability - PLEASE READ					
Please accept the entries (property)described herein. I am the owner of the property specified herein or the supervisor of the project with authorization to act as an agent and to bind the owners of the property in all matters herein. I have read, understand and agree to abide by all the rules and regulations governing the fair entries as published in the Official Entry Book. I agree to indemnify, defend, and save harmless the fair, its officers, agents and employees from any and all clamis and losses accuring to any and all persons in connection with my participation in the Fair and from any and all claims and losses accuring or resulting to any and all persons in connection with my particiation in the Fair and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be damaged as a result of my participation.					
Signature: Date EXHBIT ADULT LEADER					