

**Grange Registration Form  
Please Print Clearly**

**Name:** \_\_\_\_\_ **Phone:** ( ) \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

GRANGE/ART HALL		
CLASS #	NAME OF CLASS (One entry per line)	COST
____ Season Ticket(s) @ \$25.00 Mad. Co. Jr. Fair Pass Required Additional Purchase of Daily Admission Tickets @ \$7.00 each Payment by:      Check #              Cash	TOTAL TICKET AMOUNT	
	TOTAL AMOUNT ENCLOSED	
<b><i>Make all checks payable to: MADISON COUNTY FAIR</i></b>		