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 TICKET				TOTAL TICKET			
Required Additi	onal Purchase of Da	aily Admissic	on Tickets	AMOUNT			
@\$7.00 each Payment by: Check # Cash			TOTAL AMOUNT ENCLOSED				