ENTRY FORM

ORO AGRICULTURAL SOCIETY

PRESENTS

# ORO WORLD'S FAIR

PO Box 175, Oro, ON L0L 2X0 - Tel (705) 487-1753 Fax (705) 487-1756

| EXHIBITORS NO. | EXHIBITOR'S NAME | |
|---|---|---|
| | ADDRESS | |
| | TELEPHONE | |
| | DATE | |
| | POSTAL CODE | |

| CLASS | SECTION | DESCRIPTION | PRIZE | PRIZE MONEY |
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| Total Prize Money | |
| % Retained | |
| Membership Retained | |
| Total Amount Deducted | |
| Amount Paid | |
| Cheque No. | |

I intend to exhibit the animals/articles listed above, in accordance with the Rules and Regulations of the Oro Agricultural Society, and in so at my own risk. I hereby acknowledge that I have a minimum of $500,000 liability insurance as required to enter classes involving livestock and machinery. I/We shall indemnify and hold harmless the Oro Agricultural Society (Oro World's Fair) it's directors, members, agents, and employees, from and against all claims, demands, losses, costs, damages, actions, suits or proceedings by any third parties that may arise out of, or may attribute to, all operations performed by or carried out by the above signed, his agents, employees or anyone for whose acts he may be held liable, howsoever caused.

Signature _____