

CLAY COUNTY FAIR SPACE APPLICATION

PLEASE TYPE OR PRINT

FIRM, ORGANIZATION OR INDIVIDUAL NAME _____

ADDRESS _____ CITY & STATE _____

ZIP CODE _____ PERSON RESPONSIBLE FOR THIS APPLICATION* _____

E-MAIL ADDRESS _____

PHONE NUMBERS:

BUSINESS (_____) _____ RESIDENCE (_____) _____ FAX (_____) _____

CELL (_____) _____

***(Contracts and all other correspondence will be sent to this person.)**

EXHIBIT PURPOSE – PRODUCTS OR SERVICES TO BE DISPLAYED OR SOLD (Use back of application if needed):

TYPE OF SPACE DESIRED: INDOOR _____ OUTDOOR _____
(Indicate order of preference, if either.)

SPACE SIZE DESIRED: Frontage X Depth
_____ (Minimum)
_____ (Preferred)

Space required must include room for all awnings, tie-ons, overhangs, trailer hitches, etc.

THREE REFERENCES (INCLUDE BUSINESS, BANK, FAIR OR SHOW REFERENCES WITH CONTACT PERSON, ADDRESS AND TELEPHONE NUMBER FOR EACH):

DATE _____

(Signature)

**RETURN TO: CLAY COUNTY FAIR ASSOC., INC.
P.O. Box 527
Spencer, Iowa 51301
Phone: 712-262-4740
Fax: 712-262-4741
Email: clayfair@ncn.net**

**Support materials may be submitted to
accompany this registration form—
i.e. photographs, brochures, etc.**