FAIR CLASS WINNERS ELIGIBLE TO GO 1	O OAAS DISTRICT# COMPETITION
Hand-Quilted Quilt	Machine-Quilted Quilt
	Exhibitor #:
Exhibitor Name:	Exhibitor Name:
	Address:
Telephone:	Telephone:
Email:	Email:
	Pattern Name:
Butter Tarts	Youth Chocolate Chip Cookie
Exhibitor #:	Exhibitor #:
Exhibitor Name:	Exhibitor Name:
Address:	Address:
Telephone:	Telephone:
Email:	Email:
Honey	Maple Syrup
Exhibitor #:	Exhibitor #:
Exhibitor Name:	Exhibitor Name:
Address:	Address:
Telephone:	Telephone:
Email:	Email:
Description:	Description:
	INSTRUCTIONS:
	Input information from eligible entries and submit form to District immediately following your fair Provide eligible exhibitors with the District Contact name and phone/email address and District Competition date, time and location.
	Thanks for your assistance.
AGRICULTURAL SOCIETY INFORMATION	
Fair Name:	
Fair Date:	
Submitted by:	
Telephone:	
Email:	

IMPORTANT: to be completed immediately following judging. Please keep a copy and send a copy to your District.