

FOR OFFICE USE ONLY
AWARD _____
AMOUNT PAID _____

DUQUOIN STATE FAIR

INDIVIDUAL PARTICIPANT

Special Events Entry Form

Please check event of your choice:

- () Baby Picture Contest () Parent/Child Look Alike Contest () Dog/Cat Photo Contest () Ponytail/Pigtail Contest
() Washer Pitching Contest () Farm Yard Follies () Cutest Little Farmer Contest () Smile Contest () Diaper Derby
() Decorated Diaper Contest () Pedal Pull Competition () Washer Tournament () Corn Hole Tournament

Contestants School: _____

Contestants Name: _____ Home Phone _____ Cell Phone _____

Contact Person:(Please include both Parent's name) _____

Home Address: _____ City _____ State _____ Zip _____

Birth date _____ Age _____ Male () Female ()

FEEL FREE TO MAKE AS MANY COPIES AS NEEDED

Submit to: DuQuoin State Fair, Special Events Department
655 Executive Drive, DuQuoin, IL 62832
Telephone: 618/542-1515 TTY 866/287-2999 Fax: 618/542-1541

IMPORTANT NOTICE: This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under 20 ILCS 210. Failure to provide this information shall prevent this form from being processed. This form has been approved by the State Forms Management Center. In accordance with the Americans with Disabilities Act, any attendee requiring a reasonable accommodation should notify us by August 15, 2019.
IL 406-1444 (Rev. 6-19)

