ACF Public Speaking Entry Form

** This is for Out of County entries ONLY**

Club Name Contact Person Contact Phone Contact Email			FAIR				
				Mailing Address			
					Age Divisio		
				Exhibitor Name	•	14-18 yr.) Title of Sp	eech
Payment Options (Entry fee is \$20)/exhibitor)						
•	•	r@gmail.com and request a link					
Make a check payable to Ar Lufkin, TX 75901.	ngelina County Fair an	d mail with this form post marke	d by the deadline date to 1615 S Chestnut				
Total # of Exhibitors Entered	J	Check Total	Check #				