

EXHIBITOR SHIRT ORDER FORM

CHILDS NAME: _____

CLUB: _____

SHIRT SIZE:

CHILD: ___S ___M ___L ___XL

ADULT: ___S ___M ___L ___XL ___2XL

Amount enclosed: \$10 each \$_____

Shirt orders must be mailed to Fair Office, P.O. Box 52, Stoughton, WI 53589 no later than 5/31/21. Please include payment with your order.