

# **OVERTON COUNTY AGRICULTURAL FAIR**

## **JUNIOR FAIR BOARD APPLICATION**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

School: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Why do you want to be on the Junior Fair Board, and what do you hope to gain from this experience? Explain below:**

\_\_\_\_\_  
\_\_\_\_\_

Shirt Size:    **M   L   XL   XXL   XXXL**

I \_\_\_\_\_ understand that there are **7** mandatory work dates that I **MUST** attend. **The Barn Sale in April; Monday & Tuesday Clean Up Days of Pageant Week; Exhibit Entry Day; Special Needs day; Kids Extravaganza; & Entry Removal Day.\*\*NO EXCEPTIONS**

Do you have reliable transportation to and from the Fairgrounds?    **Yes / No**

## **ATTENTION PARENTS/GUARDIAN(s)**

- In the case of an Emergency, and I cannot be reached, I hereby give my permission for my child to receive medical treatment. This includes: Hospitalization, Anesthesia, Surgery, and/or Medication.
- Medical providers are authorized to disclose ANY/ALL findings, test results, & treatment plans to the Overton County Fair Board Members in my absence.
- I understand that participation in Fair activities can be demanding, and have carefully considered the risks. With this in mind, I give my consent for my child to participate on the Overton County Junior Fair Board. I release the Overton County Fair Board from ANY/ALL claims and/or liability that may arise.

Parent/Guardian Name(s): (print) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Applicants must be between 6<sup>th</sup> and 12<sup>th</sup> grade **DURING** the school year **PRIOR TO** the fair. Each Junior Fair Board Member is required to attend **ALL** Junior Fair Board meetings on the first Tuesday of each month, as well as working **ALL** mandatory days. Members **MUST** be available to work the week Prior to, as well as the week of the Fair. **\*\*NO EXCEPTIONS\*\***

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you have and questions call the Junior Fair Board Director, Sonia McCowan at 931-319-7742 or e-mail at [jfbdirectorsonia@gmail.com](mailto:jfbdirectorsonia@gmail.com) . If no answer, please leave a message.