

Taylor County Fair Participating Youth Organization Roster

Year: _____

Name of Organization

Adult Advisor/Contact Person

Phone Number

Email Address

Please print member name neatly or submit a typed list:
Photocopy as needed

Grade
as of Jan 1

DOB

1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____

Signature

Date

Duplicate if necessary for additional members.
Submit with Registration to Taylor County Fair, PO Box 182, Medford, WI 54451
Questions? Contact 715-748-3348 witaylorcountyfair@gmail.com witaylorcountyfair.com