

FARM FAIR REGISTRATION FORM

NAME _____ YES _____ we will be attending

SCHOOL _____ NO _____ we will not be able to attend

OF STUDENTS _____ # OF TEACHERS _____ # OF PARENTS _____

OF MILKS NEEDED: _____ WHITE _____ CHOCOLATE (Include teachers & parents)

NAME _____ YES _____ we will be attending

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Please fill out a separate registration for each class so we can have a detailed milk count!

Mail to: Daviess County SWCD, 2526 E. National Hwy, Washington IN 47501 Email: dc.swcd@daviess.org