

<p>FOR OFFICE USE ONLY</p> <p>AWARD _____</p> <p>AMOUNT PAID _____</p>

DUQUOIN STATE FAIR
INDIVIDUAL PARTICIPANT
Special Events Entry Form

Please check event of your choice: Please use a separate form for each contest you are entering.

() Kid's of Personality Contest () Parent/Child Look Alike Contest () Recreation Photo Contest () Pet/Owner Look Alike Picture Contest

Craziest Costume Photo Contest () Dog () Cat () Any Other Pet Cutest Photo Contest () Dog () Cat () Any Other Pet

() Ponytail Contest () Pigtail Contest () Moo Moo Chug-a-Lug () Gorgeous Goat () Smile Contest () Beard or Mullet Contest () Junior Mullet

() Pedal Pull Competition () Talent Contest () Lip Sync Contest () Quarterback Challenge () Back Seat Driver Contest () Lego Contest

() Washer Tournament please list both team members _____ () Corn Hole Tournament please list both team members _____

Contestants Name(s) _____ Male () Female () Birthdate _____ Age _____

Home Phone _____ Cell Phone _____ Birthdate _____ Age _____

Contact Person:(Please include both Parent's names) _____

Home Address: _____ City _____ State _____ Zip _____

Birthdate _____ Age _____ Premium/Contest/Entry/ Number _____

FEEL FREE TO MAKE AS MANY COPIES AS NEEDED

Submit to: DuQuoin State Fair, Special Events Department

655 Executive Drive, DuQuoin, IL 62832

Telephone: 618/542-1515 TTY 866/287-2999 Fax: 618/542-1541 Special Events: 618-626-6036 **by emailing *Tawmi.Conley@Illinois.gov***

IMPORTANT NOTICE: This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under 20 ILCS 210. Failure to provide this information shall prevent this form from being processed. This form has been approved by the State Forms Management Center. In accordance with the Americans with Disabilities Act, any attendee requiring a reasonable accommodation should notify us by August 16, 2024.

IL 406-1444 (Rev. 6-18)

Team/Individual Name: _____

RELEASE AND INDEMNIFICATION AGREEMENT

I (We), the undersigned, in consideration of being allowed to participate in (activity) _____
At the DuQuoin State Fair conducted on (date) _____, 20____ at (time) _____, do for myself
(ourselves) and my (our) heirs, successors, assigns, executors and administrators, hereby fully and forever release and discharge the State of
Illinois, the Illinois Department of Agriculture, its director, its officers, employees and agents, and their heirs, successors, assigns, executors and
administrators from any and all claims, demands, rights of action or causes of action, present or future, whether the same be known, unknown or
anticipated, resulting from or arising in connection with the use and occupancy of the DuQuoin State Fair.

The undersigned further agrees to indemnify and hold the State of Illinois, the Illinois Department of Agriculture, and its directors, officers,
employees and agents, harmless from and against any and all liabilities, demands, claims, suits, losses, damages, causes of action, fines or
judgments, including costs, attorney's and witnesses' fees, and expenses incident thereto, for injuries to persons (including death or mental
anguish) and for loss of, damage to, or destruction of property (including property of the State) or any other injury resulting from or arising out of
any act or omission committed by myself (ourselves) or my (our) agent(s) relating to the use and occupancy of the DuQuoin State Fairgrounds.

I acknowledge that I have read, understood, and freely signed the foregoing Release and Indemnification Agreement.

Each Individual/team person is responsible for signing their own name.

Representative's Signature _____

If participating in the Lip Sync or Talent Competition, please list any songs you will be using in the contest below.
