LOS ANGELES INTERNATIONAL DAIRY COMPETITION

ENTRY FORM

Exhibitor #: _____
(office use only)

$50.00 per entry
Entry form due February 15, 2020

Leave Blank	Division Number	Class Number	Brand/Trademark Name of Product	Name of Dairy as it should appear on Awards List (only if different from below)	Simple Item Description	Flavor

Total number of entries _____ x $_____ = $ _____ Total amount enclosed _____ Please make checks payable to Fairplex

Credit card #_____ Expiration _____ Name on card _____
(Visa, MasterCard, American Express, or Discover only)

Dairy/Company Name _____Brand on Label (only if different) _____
Results will be listed under Dairy/Company Name unless otherwise indicated. Please provide an accurate e-mail address and attach business card if possible.

Mailing Address _____ City_____ State _____ Zip _____

Contact Person_____ Telephone_____E-mail_____

Mail Dairy Entry Form and Products to: LA County Fair, Attn: Dairy Products, 1101 W. McKinley Ave., Pomona, CA 91768. For more information, please call Colene Nath at (909) 865-4230, e-mail at nath@fairplex.com **Entry form may be photocopied.**