

# Winnebago County Fair Advance Ticket Order Form

	<u>Quantity</u>	<u>Cost</u>
<b>DAILY ADMISSION</b> (allows admission into Grounds, Parking, Grandstand Shows and <u>Unlimited Midway Rides</u> )		
Ages 4 and older    \$8 per day ( <b>until 9:00 p.m. on Monday of fair</b> )	_____	_____
Ages 4 and older    \$10 per day	_____	_____
<b>WCFA MEMBERSHIP PASS</b> (allows admission into Grounds, Parking and Grandstand Shows <u>every day</u> )		
\$25 WCFA Membership Pass ( <b>before June 30th</b> )	_____	_____
\$30 WCFA Membership Pass ( <b>after July 1st</b> )	_____	_____
Junior Exhibitor \$6/Season Pass ( <b>must be picked up</b> )	_____	_____
Add \$1.00 per mail order		\$1.00
Credit Card Use (\$1.00/ticket)		\$ _____
Total Order		\$ _____

Credit Card # \_\_\_\_\_  
( ) VISA ( ) MASTERCARD Add \$1 per ticket w/Charge

***Please use additional sheet if more space is needed!***

NOTE: ALL INFORMATION MUST BE COMPLETELY FILLED OUT IN ORDER TO RECEIVE DAILY ADMISSION TICKETS AND/OR SEASON MEMBERSHIP PASSES IN A TIMELY MANNER!

<p style="text-align: center;"><b>WCFA Membership Pass</b></p> <p>Name: _____ Address: _____ Phone: _____</p> <p>*Membership entitles you to admission to the fairgrounds &amp; grandstand shows Tuesday-Sunday <b>\$25.00 Before June 30</b> <b>\$30.00 after July 1</b></p>	<p style="text-align: center;"><b>Junior Exhibitor Season Pass</b></p> <p>Name: _____ Address: _____ Phone: _____</p> <p>*Individual pass <u>only</u> for youth exhibitors.</p>
<p style="text-align: center;"><b>WCFA Membership Pass</b></p> <p>Name: _____ Address: _____ Phone: _____</p> <p>*Membership entitles you to admission to the fairgrounds &amp; grandstand shows Tuesday-Sunday <b>\$25.00 Before June 30</b> <b>\$30.00 after July 1</b></p>	<p style="text-align: center;"><b>Junior Exhibitor Season Pass</b></p> <p>Name: _____ Address: _____ Phone: _____</p> <p>*Individual pass <u>only</u> for youth exhibitors.</p>
<p style="text-align: center;"><b>Daily Admission</b></p> <p>Name: _____ _____ _____ Address: _____ _____</p>	<p style="text-align: center;"><b>Daily Admission</b></p> <p>Name: _____ _____ _____ Address: _____ _____</p>

**Mail To: WCFA, 3017 State Rd 116, Omro, WI 54963**  
For More Information Call: Fair Office (920) 231-6002