

SUMMIT COUNTY FAIR TICKET FORM

Mailing Address: Summit County Fair, PO Box 89, Tallmadge, OH 44278

NAME : _____

PHONE NUMBER _____

PARKING FEE - \$35 PER SPACE _____ SPACE(S) @ \$35 EACH = \$ _____

Name for Parking Space _____

Wristbands: _____ @ \$30 each = \$ _____

Season: _____ @ \$30 each = \$ _____

Issue Season Pass in the Last name of: _____

All Week Ride Pass : _____ @ \$50 each = \$ _____

TOTAL FEES ENCLOSED: Make Checks Payable to: S.C.A.S. \$ _____

NO REFUNDS!

DATE	RECEIPT	AMOUNT PAID	SEASON PASS#	PARKING SPACE#	LOT NUMBER