



Group Sale Tickets-Camps

Date of Fair Attendance: _____ Time of Arrival: _____

Contact Person's Name: _____

Phone Number: _____

Email Address: _____

Name of Organization: _____

Address:

Number of Tickets Ordered: _____

Group Rates:

20 or more tickets are at the rate of \$16.00

How would you like to get your tickets: (Please circle one) Pick up at Fair Office Mailed

Total Price: _____

Method of Payment: _____

Will Campers be bringing their own lunches? YES or NO

Please call the fair office to let us know you have arrived at Gate 3. (518)861-6671

Office Use Only:

Date check received: _____ Number: _____

Pick Up/Mailed: _____

Date sent: _____

Transaction completed by: _____