

**CLARK COUNTY FAIR  
JUDGES REQUEST FORM**

**Please submit the judge's form to the Administration office no later than April 1, of the current Fair year.**

**Please use one form for each Judge.**

**DEPARTMENT NAME:** \_\_\_\_\_

**SUPERINTENDENT'S NAME:** \_\_\_\_\_

**ADDRESS OF SUPERINTENDENT:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**DAY PHONE:** \_\_\_\_\_ **HOME PHONE:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**ASSISTANT SUPERINTENDENT:** \_\_\_\_\_

**DAY PHONE:** \_\_\_\_\_ **HOME PHONE:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**MY JUDGE'S NAME IS:** \_\_\_\_\_

**ADDRESS OF JUDGE:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**JUDGING DATE (S):** \_\_\_\_\_ **START TIME** \_\_\_\_\_ **TO** \_\_\_\_\_

**JUDGING DATE (S):** \_\_\_\_\_ **START TIME** \_\_\_\_\_ **TO** \_\_\_\_\_

**JUDGING DATE (S):** \_\_\_\_\_ **START TIME** \_\_\_\_\_ **TO** \_\_\_\_\_

**JUDGING DATE (S):** \_\_\_\_\_ **START TIME** \_\_\_\_\_ **TO** \_\_\_\_\_

**ACCOMMODATIONS:** YES \_\_\_\_\_ NO \_\_\_\_\_

**ACCOMMODATIONS check in day/date:** \_\_\_\_\_ **check out day/date:** \_\_\_\_\_

**PLEASE CIRCLE TYPE OF ACCOMMODATIONS:**    RV CAMPING    HOTEL/MOTEL

**JUDGE QUALIFICATIONS:** \_\_\_\_\_

\_\_\_\_\_  
Thank you for your prompt response.

CLARK COUNTY FAIR  
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Ridgefield, WA 98642  
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Email: [ccfair@clarkcofair.com](mailto:ccfair@clarkcofair.com)