MONROE COUNTY AGRICULTURAL SOCIETY
P.O. BOX 908 – Tomah, WI 54660
Phone: 608-372-2081 Fax: 608-372-1052
Email: mail@tomahtractorpull.com
www.tomahtractorpull.com *www.monroecountyfairwi.com*

HUMAN FOOSBALL ENTRY FORM

Six-member team: By signing this we have read the attached rules and agree to abide by said rules or be disqualified as contestant. (Please print neatly so announcers can read names)

Team Contact Name: _____Phone: _____
Team Name: _____
Sponsor/Business: _____
Our Team wishes to compete in: Business Division or Open Division (please circle)

Members:
1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Release of Liability

I agree that the Monroe County Fair, its Committee, personnel, Tomah Fire Dept. and volunteers will not be held responsible in case of an accident or injury. ***ANY MEMBER WHO IS UNDER 18 MUST HAVE PARENT'S SIGNATURE & RELEASE***

_____ _____ _____
Members' Name Parents' Name Date
_____ Parents' Signature and Phone Number if under 18

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