

PERSONAL ENTRY SHEET
One Entry Sheet Per Person Per Department

Registration #: _____ Note: The following information is required to pay premiums.

Name: _____

☐ **SENIOR**

☐ **JUNIOR**

Address: _____

☐ BX (8 years old & under)

☐ BY (9 to 13 years old)

City: _____ Zip _____

☐ BZ (14 to 19 years old)

Email: _____

Cell: _____

DEPARTMENT 24 - FURNITURE

Home: _____

Entry Tag #	CLASS	LOT	DESCRIPTION OF ITEM	PLACE	POINTS

TOTAL ENTRIES _____

TOTAL POINTS _____