

DeSoto County Fair Assoc.
P.O. Box 970
Arcadia, Fl. 34265-0970



MEMBERSHIP FORM 20__

_____ FAMILY - \$25.00(living in same household) _____ Cash
_____ SINGLE - \$15.00 (only one person) _____ Check

NAME

ADDRESS

CITY

_____ PHONE _____ E-MAIL

**FAMILY MEMBERS
(LIVING IN SAME HOUSEHOLD)**

HEAD OF HOUSEHOLD

SPOUSE

CHILD

CHILD

CHILD

The period of membership shall be for one (1) year from June 1 to May 31; Membership dues must be paid by October 31st of each year. No exception. You can start paying after June 1st. of each year