

2018

**Harrison County Agricultural Society
Membership Form**

Mail to: P.O. Box 84, Corydon, IN 47112

www.harrisoncountyfair.com

harrisoncofair@gmail.com

HCAS is a non-profit 501c3 organization



OFFICE USE:

____/____/____
Date received:

Check #:

Rec'd By:

NAME: _____ **DOB*:** _____

ADDRESS: _____

PHONE: _____ **EMAIL:** _____

Please make checks payable (\$25) to HARRISON COUNTY AGRICULTURAL SOCIETY (HCAS) and mail along with this COMPLETED form to HCAS, P.O. Box 84, Corydon, IN 47112. If you have questions, please call (812) 267-7471. Each membership includes general admission to the fair and one general admission admittance seat on the grandstand each night.

We would love to have your input and hear your ideas? Please check any area of interest where you would like to volunteer:

____ Livestock ____ Baby Contest ____ Little Miss & Master
____ Grandstand ____ Entertainment ____ Sponsorships ____ Other

Please appoint a current member of the Harrison County Agricultural Society (HCAS) or one of the board members listed below as your proxy to vote at the annual meeting in the event that you are unable to attend the Tuesday, November 13, 2018 annual meeting. If you are able to attend your proxy will be VOID. Your form must be complete with name, address, DOB and all information below to be a valid proxy.

Board Members

Todd Uhl	Doug Henricksen	Brian Engleman
Adam Camm	Tim Harmon	Carla Clunie
John Kost	Dennis Clunie	Chris Kellem

I _____, hereby appoint _____
to act in my stead, as my attorney in fact, for the purpose of
voting on any business that may come before the membership
of the Harrison County Agricultural Society (HCAS) at the
annual meeting, on the 13th day of November 2018.

Signature: _____

*Members must be 18 years or older on the day of the annual meeting to vote at the annual meeting.