

IAHCE Registration for Cultural Arts Show

County							
District #	Exhibitor Name	Phone #	Category	Category #	Brief Description		
1							
2							
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<p>COUNTY Cultural Enrichment Director's Name _____ Phone # _____</p> <p>PLEASE RETURN BY FEBRUARY 15TH TO THE STATE CULTURAL ENRICHMENT DIRECTOR BY EMAIL OR REGULAR MAIL</p> <p>(You must enclose a self-addressed stamped envelope if by regular mail. IAHCE IS NOT RESPONSIBLE FOR LOST OR DAMAGED ITEMS.)</p>							