How to Enter Marquette County Fair with Fair Entry.com

Log in with 4-H online or select "Not in 4-H and need to create a Fair Entry Account". Multiple exhibitors can enter under the same account – for example families can register entries for multiple members of their family.	Exhibitor and Staff sign-in Exclusion of the second of th
Enter your email to create a Fair Entry account	Create a FairEntry Account With this account, you will be able to register Exhibitors and Entries for this fair. Important! If you are a 4-H member, there is no need to create a FairEntry account. Please sign in via 4HOnline instead. Email Confirm Email
Select Create	Create Account
Account	
Enter a name for your account – for example Smith Family Enter a password and phone number	Account Creation To continue with registration for this fair, please provide the following details. Email kanddhall@yahoo.com change Account Name Example: Your last name
Select Create Account	Phone Number Format: **** **** or ********* Password • 8 characters minimum • at least 1 digit • at least 1 digit • at least 1 capital letter or symbol
	Create Account
Click Begin Registration	We noticed you haven't yet registered for the fair. Begin Registration

Inter details for exhibitor New Individual Exhibitor Select Continue when details are complete Image: Complete Continue (Requeed) Date of Bith (Requeed) Image: Continue (Requeed) Date of Bith (Requeed) Image: Continue The form is incomplete Cancel Continue Enter the information on the next pages Contact Info Image: Contact Info Image: Contact Info Pormat Image: Second Contact Info Format Image: Second Contact Info Format Image: Contact Info Image: Second Contact Info Pormat Image: Second Contact Info Format Image: Second Contact Info Pormat Image: Second Contact Info Format Image: Second Contact Info Pormat Image: Second Contact Info Format Image: Second Contact Info Pormat Image: Second Contact Info Format Image: Second Contact Info Pormat Image: Second Contact Info Format Image: Second Contact Info Pormat Image: Second Contact Info Format Image: Second Contact Info Coll Phone Carrier (Collocal) Coll Phone Carrier (Collocal) Format Image: Second Contact Info Coll Phone Carrier (Collocal) Coll Phone Carrier (Collocal) Format Image: Second Contact Info	Select Individual	Do you want to register an Individual?			
Enter details for exhibitor Select Continue when details are complete If read wells If read wells Date of Binh (Required) Gender (Required) Gender (Required) Contact Info on the next pages (Details are complete Home Phone Number (Details)		💄 Individual			
Select Continue when details are complete	Enter details for exhibitor	New Individual Exhibitor			
Select Continue when details are complete Last Name (Required) Date of Birth (Required) Gender (Required) The form is incomplete Contact Info on the next pages Contact Info (Required) Format: Gender (Required) Contact Info Format: Genders (Optional) Format: Spech your cell phone number (Coptional) Format: Spech your cell phone provider) if you want to receive SMS Text messages about your FaitEntry records. Cell Phone Carrier (Coptional) A The form is incomplete. Please complete the form.	Colort Continue when	First Name (Required)			
Date of Birth (Required) Gender (Required) In the form is incomplete Cancel Contact Info Nome Phone Number (Required) (Optional) Format: Format: Specify your cell phone provider) if you want to receive SMS Text messages about your FairEntry records. Cell Phone Carrier (Optional) Cell Phone Carrier (Optional) Cell Phone Carrier Contact Info Cell Phone Carrier Contact Info Chirte form is incomplete.	details are complete	Last Name (Required)			
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Home Phone Number (Required) Format: ##=###=### or ######### Email Address (Optional) Format: name@website.com Cell Phone Number (Optional) Format: ##==##=#### or ########################	Enter the information on the next pages	Contact Info			
Email Address (Optional) Contact Info Format: name@website.com Cell Phone Number (Optional) Format: name@website.com Format: ###=###= of ###########################		Home Phone Number (Required)	Format: ###-### or #########		
Cell Phone Number (Optional) Format: ###-#### or ###########################		Email Address (Optional)	ContactInfo Format: name@website.com		
Specify your cell phone number (and cell phone provider) if you want to receive SMS Text messages about your FairEntry records. Cell Phone Carrier (Optional) The form is incomplete. Please complete the form.		Cell Phone Number (Optional)	Format: ###-### or ##########		
Cell Phone Carrier (Optional)			Specify your cell phone number (and cell phone provider) if you want to receive SMS Text messages about your FairEntry records.		
The form is incomplete. Please complete the form.		Cell Phone Carrier (Optional)	•		
		The form is incomplete. Please complete the form.			
Continue O			Continue O		

Enter Address information – this	Address				
ensures premium checks will get sent	• The exhibitor's address is very important! If this exhibitor will be receiving checks from the fair, those checks will be mailed to the address entered here.				
to the correct address.	Address (Required)				
			Address continued (Optional)		
			City (Required)		
			State (Required)	*	
			ZIp Code (Required)		
				Continue O	
Indicate who you are	Questions				
Select Open if not	1. Which of the following o	rganizations are you entering	through?		
associated with a	 4-H or FFA Open Class 				
Note: All junior	Breed Association (ex: Jr. Boy Scouts or Girl Scouts	Holstein Assoc.			
exhibitors must be	 Other 				
affiliated with a					
to be eligible to show				Continue 🕥	
in the Junior division.					
Make changes as necessary or proceed to creating entries.	Please review the exhibitor registration.				
	Personal Details	Edit	Contact Info	Edit	
	First Name	Kristen	Email	kanddhall@yahoo.com	
	Last Name	Skolarz	Home Phone	608-587-2966	
	Gender	Female	Cell Phone Carrier	000-017-3300	
	Addross	Edd			
	W6912 Cty Rd P Endeavor, WI 53930	Edit			
	Additional Questions Edit				
	1. Which of the following organizations are you entering through? Open Class				

Select Add an Entry	Skolarz 0 Entries	Kristen	Add an Entry		
Select the	Open - 114 P	ant and Soil Sciences	Select 🥱		
Department you want to enter	Open - 115 F	owers and House Plants	Select 🔿		
	Open - 118 C	ultural Arts	Select 🧿		
Select the Class within the	Starting an E	Entry			
Department	Department	Change			
	Select a Division to continue				
	128A: Home	Select 🕥			
	128B: Rugs	Select 🥥			
	128C: Quilts				
	128D: Repur	oose	Select		
Select the Lot within	Department	Open - 128 Home Furnishing	Change		
the Class and	Division	128C: Quilts	Change		
Department	Select a (Class to continue			
	01: Baby or (Crib Quilt - Hand quilted	Select 🕥		
	02: Baby or (Select 🕥			
	03: Lap Quilt – Hand quilted Soloci 📀				
	04: Lap Quil	Select 🕤			
	05: Bed Quilt – Any size – Hand Quilted				
	06: Bed Quil	Select 🕥			
	07: Embroide	Select 🧿			
	08: Quilted V	<i>k</i> all Hanging	Select 🕥		
	09: Tied Quil	Select 🕥			
	10: Any othe	Select 🔿			
	11: Any other quilted item Select 🔿				
	12: Any grou	p project created by more than one person	Select 📀		
Select Continue	Starting an	Entry			
	Department	Open - 128 Home Furnishing	Change		
	Division	128C: Quilts	Change		
	Class	06: Bed Quilt – Any size – Machine Quilted	Change		
		Cor	itinue		

Verify entry is correct	Entry #8	0	_2		
– delete to start entry	Skolarz, Kristen				
over if you made a	Questions				
mistake.	Department Open - 128 Home Furnishing There are	o questions to answer.			
	Division 128C: Quilts	Questions			
Select Continue	Class 06: Bed Quilt – Any size – Machine Quilted		Continue O		
	Delete this Entry				
Continue adding more entries	Entry #8	What do	ou want to do next?		
or	Skolarz, Kristen	For Kristen Skolarz			
Select Register			Add another Entry		
another Exhibitor if	Department Open - 128 Home		•		
adding more family	Furnishing	Add a	nother Entry in this Division		
members	Division 128C: Quilts				
Or Continue to Payment	Class 06: Bed Quilt – Any size – Machine Quilted	O R	egister another Exhibitor		
if all entries have		Continue to Payment			
Select Continue	\mathbf{O}				
(note – there are no	Devices	2 Drumat Mathed	Ganfirm		
entry fees for this	Review	Payment Method	Conirm		
fair)					
	Invoice Summary Detail				
	Individual Exhibitor: Kristen Skolarz \$0.00				
	Total: \$0.00				
	Continue O				
Select Continue					
	A payment method is not necessary because your invoice total is \$0.00.				
	Continue 🧿				
Agree to the terms	One last stanl				
and select Submit.	Agree to the terms below and press submit.				
	After you Submit Payment Total				
You will get an email	Records will be locked to editing awaiting manager approval Your credit card will not be charged until a manager approval Your credit card will not be charged until a manager approves the records If the manager does not approve all the records, the amount charged to the credit card may be less than the amount cited here.				
to say your entry was					
received and a 2 nd	the amount cited here.				
email when entries	Agree to Terms				
have been approved.	I agree to all terms and conditions set forth in the rules of the Marquette County Fair.				
	I agree to the above statement				
For help or assistance	UW Extension Office 608-297-3141				
	Or Kristen Skolarz 608-617-9366 (leave a message)				