



**EASTERN IDAHO STATE FAIR**

P.O. Box 250

Blackfoot, ID 83221

(208) 785-2480

**Raffle Approval Request Form  
2024**

Must be submitted & approved prior to the start of the Fair

**Date:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_  
**Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Booth Name** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Email :** \_\_\_\_\_

**DRAWINGS/RAFFLES:** Vendors must complete The Raffle Approval Request Form and have approval from management before holding any raffle or special drawings. If approved, vendor will need to submit names and phones numbers of the winners to Fair Management at the close of the Fair.

**Describe Raffle  
/ Drawing  
including how  
fair-goer will  
enter**

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\_\_\_\_\_  
\_\_\_\_\_  
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**List Prizes**

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