



2024 Fundraising Registration

Please complete and return this form to:

Minnesota State Fair - Attn: Kim Scibak
1265 Snelling Avenue North
St Paul, MN 55108-3099
fundraising@mnstatefair.org

Organization Name _____ Federal Employer ID # _____

Primary Contact _____

Street Address _____

City _____ State _____ Zip _____

Primary Telephone # _____

Email _____

Secondary Contact _____

Street Address _____

City _____ State _____ Zip _____

Primary Telephone # _____

Email _____

Number of Participants _____ (minimum of 10)

Ages of Participants: 16-17 18+ (Check all age categories that apply to your group - minimum age is 16)

Areas of Interest. Please check all that apply (Fair Dates: Thursday, Aug. 22 – Labor Day, Sept. 2)

Parking Park & Ride

Barn Cleaning Sanitation

How did you hear about our fundraising opportunities? _____

Has your group participated in fundraising opportunities at the fair in the past? Yes No

Year(s) worked _____ Department(s) worked for _____