



Premium Adjustment Request Form

Personal Information:

Name:

Mailing Address:

City:

State:

Zip Code:

Email:

Phone:

Entry Information:

Entry #:

Department:

Division:

Class #:

What needs to be changed?

Entry #:

Department:

Division:

Class #:

What needs to be changed?

Entry #:

Entry #:

Department:

Division:

Class #:

What needs to be changed?

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Premium Adjustment Request Form

Entry #: _____
Department: _____
Division: _____
Class #: _____
What needs to be changed? _____

Entry #: _____
Department: _____
Division: _____
Class #: _____
What needs to be changed? _____

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Division: _____
Class #: _____
What needs to be changed? _____

Entry #: _____
Department: _____
Division: _____
Class #: _____
What needs to be changed? _____

**Please email form to fairoffice@laramiecountyfair.com or mail to 3801 Archer Parkway Cheyenne, WY 82009. All emailed or mailed requests must be submitted or post marked by September 30th, 2023. Premium adjustment requests will not be accepted by phone.