

NJSF/SCFHS Creative Arts for Home & Hobby

Entry Form for Cheesecake Contest Only

Entrant's Name: _____

Parent/Guardian Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Numbers _____

Adult 18+ ✓ () Teen 13 to 17 ✓ () Adolescent 9 to 12 ✓ () Child under 9 ✓ ()

| | | | | | | | | | | | | | | | | | | | | |
|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Email | | | | | | | | | | | | | | | | | | | | |
|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

If you are interested in becoming a Display Sitter please check this box and we will contact you ✓

The exhibitor releases the New Jersey State Fair/ Sussex County Farm and Horse Show (NJSF/SCFHS) from any and all responsibility or liability for loss or damage to any entry and the release also agrees to indemnify the NJSF/SCFHS against any damage claim, legal proceedings or judgment, arising out of the handling for entry, or exhibition of, the listed entries and further agrees to hold said NJSF/SCFHS harmless from the transportation, handling for entry or exhibition of the listed entries, or storage for the same after the show, until exhibitor removes entries from the premises. By signing this form I agree that I have read the rules pertaining to my entries and hereby agree to all terms and conditions contained therein. All recipes supplied with entries become the property of the NJSF/SCFHS and may be used or reprinted in hard or digital format without compensation to entrant.

The Exhibitor agrees NOT to remove items before 6:00 PM on last day of Fair. NO EXCEPTIONS !!!

Signed: _____ Date: _____

Professional

| Item # | Category # | Article Name | Professional | |
|--------|------------|--------------|--------------|----|
| | | | Yes | No |
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |

If more than 10 entries, use additional form plus an extra fee of \$5.00 is required per Extra Form.

Send SIGNED entry Form and \$5.00 ENTRY FEE for the 1st 10 Entries[See Rule # 4, 5, 6, 7, 8, 10 & 11 in General Rules]

Make checks payable to NJSF/SCFHS send to: CAHH, PO Box 268, Augusta, NJ 07822-0268

Late entries postmarked after Pre-Registration date of July 19, 2019 will be subject to a \$7.00 Late Entry Fee For questions or clarifications on any contest, go to the Committee List for contact person

Or call Barbara Thomas at 973-534-0536 or email us at: barbjk57@yahoo.com

Full details on all our contests can be found on our website: www.njsfciah.com