

Application Form

lame:			
ddress:			
ity:		State:	Zip:
hone:		E-mail:	
		_	
hili Information:			Amount Enclosed:
\$25 ENTRY FEE			\$
Cooking On-site:	Yes No		
I Would Like To:	Sell Donate		
		000	
	at 9:00a; Judging at 11: gible, typed or handwrit		edients for Allergy Purposes. Does not
have to include		0	· .
	•		the judging. Proceeds will go to the
	ng. Proceeds from dona	_	
Please see cook	-off rules for any and all	information pert	aining to this event.
MAKE CHECKS	PAYABLE TO: "TREASU	RES on the TRAIL	" Village of Pocahontas
	PLEASE	SEND TO:	
	Sue k	Covach	
	_	Box 34	
	Pocahonta	as, IL 62275	
	- — · — · - DO NOT WRITE	BELOW THIS LINE —	
FFICE USE ONLY:			
Fee Paid: \$		Paid By: Cash or	Check (Check #:)
			٦
	Conte	stant #:	