



AVARD 7TH ANNUAL DUTCH OVEN COOK OFF ENTRY FORM

Complementary
Biscuits + Gravy
Breakfast
Saturday AM
for
Competitors +
Vendors

Name: _____

Team Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ No. in Team: _____

Level of Experience as a Dutch Oven Cook

Novice Experienced Professional

Signature (s): _____

I allow as Individual Contestant / Captain of my team that all photos may be used for publication (Initial): _____

I allow as Individual Contestant / Captain of my Team that my recipe may be used for publication (Initial): _____

Entry Fee: \$20.00 - Covers ALL Categories

Mail Entry Fee, Registration Form and copy of your recipe (if agreed) to:

Avard 7th Annual Dutch Oven Cook Off

c/o Nan Wheatley - Treasurer
1026 Northern St. - AVARD
Alva, OK 73717

Judging
Starts
@ Noon

