

CARVER'S NUMBER

Aqua Tape

Registration Form MASTER'S CLASS

M

Last First Initial

Address _____ City _____

State/Province _____ Country _____ Zip _____ Phone Number _____

E-mail Address

NOTE: Each entry on this form must be assigned a letter (A, B, C, D...)

FOR OFFICE USE ONLY

DIVISION ME - Decorative Lifesize Floating Waterfowl

	Species	Gender	Description	Total
ME 1	Marsh Ducks	_____	_____	_____
ME 2	Diving Ducks	_____	_____	_____
ME 3	Geese, Swan & Confidence	_____	_____	_____

DIVISION MF - Decorative Lifesize Wildfowl

	Species	Gender	Description	Total
MF1	Waterfowl	_____	_____	_____
	Shorebirds	_____	_____	_____
	Wading Birds	_____	_____	_____
	Seabirds	_____	_____	_____
MF2	Upland Game Birds	_____	_____	_____
	Birds of Prey	_____	_____	_____
MF3	NP Landbirds & Songbirds	_____	_____	_____

DIVISION MG - Decorative Miniature Wildfowl

	Species	Gender	Description	Total
MG1	Waterfowl	_____	_____	_____
	Shorebirds	_____	_____	_____
	Wading Birds	_____	_____	_____
	Seabirds	_____	_____	_____
MG2	Upland Game Birds	_____	_____	_____
	Birds of Prey	_____	_____	_____
MG3	NP Land Birds & Songbirds	_____	_____	_____

DIVISION MH - Interpretive Wood Sculpture

	Species	Description	Total
	_____	_____	_____

I agree that the above entries will not be removed until **after 4 p.m. Sunday**, the end of the show. I certify that all entries submitted by me are in accordance with the published rules and that I absolve The Ward Foundation from any loss or damage to my entries. I agree to allow my entries to be photographed by photographers authorized by The Ward Foundation and to the distribution of such photographs at the Foundation's discretion. **This is your receipt. You must have it visibly in your possession when you remove your entries at 4 p.m. on Sunday. Please do not pack up your entries until after you have been checked at the door.**

*** IRS Form W-9 will be passed out at the hospitality room from noon-2pm on Sunday. It must be completed and given to the accountant prior to receiving monetary award.**

Division	Fee	x	Number	= Total
Division ME, MF, MG, MH	\$ 100.00	(1)	\$ 100.00
Add'l entries ME, MF, MG, MH	\$ 50.00	()	\$
TOTAL FEES DUE			\$	

Cash Credit Card Check # _____

Signature of Artist / Delivery Person _____ Date _____

NOTE: ALL NON-MEMBERS WILL BE CHARGED A SURCHARGE OF \$10 TO ENTER THE COMPETITION.