MIWW ENTRY FORM: NATIONAL, STATE, & DISTRICT

Name (type or print)			
Mailing Address			
		Zipcode	
District Number (if applicable)	Contes	st Date	
		hone ()	
Email Address			
Birth Date			Make It With
Month / Day / Year	Age on Jan 1 of	current year	
Age Division or Category: Chec	k one only. Age Division	is determined by your age on	(\mathbf{n}, \mathbf{n})
January 1 of the current year.			11 0012
Preteen (12 & under)	Junior (13-16)	Wearable Accessory	1001
Senior (17-24)			1 1/1/1
(Note: Not all states have all age of	livisions and/or categories	3)	
Garments: Check one and list th	ne piece(s) you are maki	ng.	
1-Piece Garment			
2-Piece Outfit			
Ensemble – 3 or more piec	es worn at the same times	1e	
Pattern(s) Used:			
Pattern Co. & Number			
Pattern Co. & Number			
Pattern Co. & Number			
Number of Yards Wool / Wool Blen	nd Fabric Used		
Number of Skeins Wool / Wool Ble	end Yarns Used		
Make of Sewing Machine Used			
Make of Serger Used			
My fabric(s) and varn(s) have bee	n lab tested [.] Yes	No (Fabrics/yarns must test at	least 60% wool fiber)
		No (i doned yame muct teet at Description of Wool	
Lab Test Number	% Wool	Description of Wool	
Lab Test Number	% Wool	Description of Wool	
Print and Mail this form with:			
• a 3" x 3" sample of each v	wool fabric and/or 12" of e	ach varn used	
•		Checks payable to: National MIWV	V)
• Mail to National MIWW •			• /
Mail a second copy of this form			
		Director with applicable fees (for tes	sting and/or state fee)
Please contact your State			sting ana/or otato rooj.
•			
Mail a third copy of this form wi			
• 3" x 3" fabric and 12" yarn	sample(s) to your District	Director with applicable fees. Con	tact your Director.
Entry form may be copied as no	eeded. Use a separate form	for each entry. Read brochure/website	e for further details.
		Y IS NOT COMPLETE WITHOUT A ot responsible for late, misdirected	,
In consideration of being acconted to con	anete at any level (district state	or national) in the Make It With Wool prov	aram I agree to abide by all

In consideration of being accepted to compete at any level (district, state or national) in the Make It With Wool program, I agree to abide by all rules set forth in the Official MIWW Entry Brochure and the rules and regulations of those in charge. I will accept the decision of the judges as final. I further agree that those in charge will have the right to eliminate me if I fail to comply with said rules. I hereby certify that **I personally** selected and made this garment. It is my own planning and workmanship. My garment(s) are made from a minimum of 60% loomed, knitted, crocheted or felted wool fabric or yarn.

Parent/Legal Guardian signature, if contestant is a minor____

Check this box to give MIWW permission to use photograph(s) of contestant for promotion of the MIWW contest.

Visit the website for additional information and guidelines: www.makeitwithwool.com