

Union Co. 4-H Foundation Annual Fall Festival



BAKED GOODS COMPETITION ENTRY FORM

PARTICIPANT'S NAME: _____

PARENT/GUARDIAN NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **E-MAIL:** _____

AGE (as of January 1, 2016): _____

CATEGORY:

_____ **Breads**

_____ **Cakes**

_____ **Cookies**

_____ **Miscellaneous Sweets**

SUBMIT FORM TO:

Crystal Starkes, 4-H Agent
3230-D Presson Road
Monroe, NC 28112
FAX: 704-283-3734

E-MAIL: crystal_starkes@ncsu.edu

- OR -

COMPLETE ONLINE: www.union4Hfoundation.com