WARD FOUNDATION, SALISBURY UNIVERSITY
909 S. Schumaker Drive, Salisbury, MD 21804 ▪ 410-742-4988 ▪ www.wardmuseum.org

White Tape

Registration Form
WORLD

CARVER'S NUMBER
W

Last _____ First _____ Initial ____

Address _____ City _____

State/Province _____ Country _____ Zip _____ Phone Number _____

E-mail Address _____

DIVISION A - Decorative Life-size Wildfowl: John Scheeler Memorial Award

Species _____

Title _____

Description _____

DIVISION B - Decorative Life-size Waterfowl Pair

Species _____

Title _____

Description _____

DIVISION C - Decorative Miniature Wildfowl

Species _____

Title _____

Description _____

DIVISION D - Interpretive Wood Sculpture

Species _____

Title _____

Description _____

DIVISION SR - Shootin' Rig : Jimmie Vizier Memorial Award

Species _____

Title _____

Description _____

Entrants are limited to 1 entry in each category.

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.**

Division	Fee	x Number	= Total
1st entry A, B, C, D & SR	$ 150.00	( )	$
	TOTAL FEES DUE		$

Cash **Credit Card** **Check #**_____

*** 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.**

Signature of Artist / Delivery Person_____ Date_____

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

WHITE COPY–MERCHANT COPY • CANARY COPY–ACCOUNTING COPY • PINK COPY–COMPETITOR COPY