

LITTLE MISS PUMPKIN SHOW ENTRY BLANK

WEDNESDAY, OCTOBER 20th, 2010 at 3:30 PM.

Must be registered by Wednesday, October 13th

Name _____

Address _____

Age _____ Phone _____

Sponsor _____

School _____ (see page 22 for more info)

Parents/Guardian's Name _____

Contestant must be a resident of one of the following school districts:

Circleville ___ Logan Elm ___ Teays Valley ___ Amanda ___

Westfall ___ Zane Trace ___ (Please check one)

Mail to: ROB FEBES, 360 NICHOLAS DRIVE, CIRCLEVILLE, OH 43113 • 474-9481

PICTURE/NAME CONSENT AND WAIVER

I hereby consent to having the above child's picture/name appear on/in any Newspaper, Electronic Media, Printed Material, or Web Page in association with the Circleville Pumpkin Show, Inc. I understand her picture may be displayed in accordance with the above-mentioned activity. I further acknowledge that my child's name may or may not be used in connection with her picture.

I hereby agree on behalf of the above mentioned child and with agreement of her other parent or legal guardian to waive any claims against the Circleville Pumpkin Show, Inc., or (Officers, Trustees, Chairmen, or Volunteers) which may arise from the use of said picture or names in the above event.

_____(Parent/Legal Guardian Signature)_____ Date

Waiver must be signed in order to participate.

BABY JUDGING AND PARADE ENTRY BLANK

THURSDAY, OCTOBER 21, 2010 3:30 P.M.

ENTRY BLANK MUST BE MAILED TO:

LINDA JENNE', 410 BROOKHAVEN PLACE, CIRCLEVILLE, OHIO 43113

MUST INCLUDE STAMPED, SELF ADDRESSED RETURN ENVELOPE

Entries To be postmarked by Thursday, October 14, 2010

Parent's name _____

Address _____ Phone: _____

City _____ (Contestant must be a resident of one of the following school districts) Circleville ___ Logan Elm ___

Teays Valley ___ Amanda ___ Westfall ___ Zane Trace ___

Child's Name (First) _____ (Last) _____

Child's Age in Months _____ Birth Date _____ Male ___ Female ___

Is this a registration for Most Artistic Stroller, Wagon, Mini Float entry? Yes ___ No ___

PICTURE/NAME CONSENT AND WAIVER

I hereby consent to having my child's picture/name appear on/in any Newspaper, Electronic Media, Printed Material, or Web Page in association with the Circleville Pumpkin Show, Inc. I understand his/her picture may be displayed in accordance with the above-mentioned activity. I further acknowledge that my child's name may or may not be used in connection with his/her picture.

I hereby agree on behalf of the above mentioned child and with agreement of his/her other parent or legal guardian to waive any claims against the Circleville Pumpkin Show, Inc., or (Officers, Trustees, Chairmen, or Volunteers) which may arise from the use of said picture or names in the above event. *Waiver must be signed in order to participate.*

_____(Parent/Legal Guardian Signature)_____ Date

2010 COMPETITION FLOAT ENTRY APPLICATION

Name of Sponsoring Organization or Company:

Name and address of person to contact concerning entry:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Important: In the event your float is selected as a prize winner, please indicate the name the award check should be written to:

I (we) would like to enter a float in the following category (check one).

- Class 1 - Scouts, School, Youth, Church
 Class 2 - Commercial, Industrial
 Class 3 - Fraternal, Civic, Festival
 Class 4 - Small Business, Special

MAIL COMPLETED APPLICATION TO:

Connie Tootle, 159 East Franklin Street, Circleville, Ohio 43113

Include with the application Eight (8) 3 x 5 typed (one-side only) index cards describing the float entry (identical information on each card) and a snapshot of float. The application materials must be received **NO LATER THAN NOON ON SATURDAY BEFORE THE START OF PUMPKIN SHOW**. All floats must be assembled at the Pickaway County Fairgrounds no later than 4:00 P.M. Wednesday (opening day) for judging. For more detailed information, consult the section on "Competition Floats" in the premium book or at www.pumpkinshow.com

BIG WHEEL RACE

THURSDAY, OCTOBER 21, 2010 1:30 TO 3:00 P.M.

Entries Must Be Postmarked by Friday, October 15, 2010

Name _____

Phone _____ Date of Birth _____

Parents Consent or Guardian _____

Mail Entry To:

Sue Pairan, 7639 Amanda Southern Road, Amanda, Ohio 43102, 740-412-1536

1. Child must be 4 to 5 years of age but not have reached their 6th birthday by November 1, 2010
Must be a resident of Pickaway County
3. All Big Wheels will be furnished
4. Must be at Pinckney Street platform by Thursday, October 21 at 1:30 p.m.
5. The Big Wheel Race is sponsored by Circleville Rotary Club