

ENTRY FORM FOR STORY OF JOB

Name: _____ **DOB:** _____

Address: _____

Phone: _____ **Bethel No:** _____

Email Address: _____

Category/Experience Level:

(This includes all Maryland & Supreme competitions and Pageant)

_____ **Novice – First time competing**

_____ **Journeyman – has competed 2 to 3 times**

_____ **Master – has competed 4 or more times**

Competing Time Preference: _____ AM _____ PM ~~~~~ <i>If you have a prior commitment the day of the competition and require a specific competing time, please contact the chairman as soon as possible.</i>
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Daughter's Signature

Bethel Guardian's Signature

Bethel Guardian's Email Address

Mail to:
Mary Lou Walter
P.O. Box 66
Churchville, Maryland 21028
MarWalter@comcast.net

**This form must be postmarked January 18, 2010.
One point per day after deadline will be deducted from your total score.**