

FOODS DEPARTMENT ENTRY FORM

☐ Topsfield Fair
Weekend Food
Contest

☐ Topsfield Fair
Fall Harvest
Baked Sweet
Treat Contest

☐ King Arthur
Baking Company
Contest - Frosted
Cupcake

☐ Topsfield Fair
Apple Pie Contest

☐ Parent & Child Cookie
Celebration Contest -
Decorated Sugar Cookie

PLEASE PRINT OR PLACE LABEL HERE: (One Category per form. Please copy form as needed.)

Name _____ Date of Birth _____

Street _____ Tel. No. _____

Town _____ State _____ Zip _____

E-Mail Address	Exhibitor No. (If Known)
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[illegible]

• Please feel free to make copies of this form •

Mail entries to: Topsfield Fair, P.O. Box 134, Topsfield, MA 01983

SEE INDIVIDUAL DEPARTMENT RULES FOR ENTRY DATES