



2018 ARTIST REGISTRATION FORM

NAME: _____

BUSINESS NAME(if applicable): _____

PLEASE CHECK ONE OF THE FOLLOWING:

DONATION

DISPLAY ONLY

ADDRESS: _____

PHONE: _____

EMAIL: _____

OF PIECES: _____

PLEASE TELL US A LITTLE ABOUT YOURSELF AND YOUR ART:

- If you plan to donate one or more of your items, please mark which one(s).
- Return this form to the following: Chugwater Chili Cookoff, PO Box 222, Chugwater, WY 82210
- We can accept applications on or before June 9, 2017.
- If you need arrangements in getting your artwork to the Chugwater Business Center, please contact Terri Skiba (719)338-8437, chugwaterchilicookoff@gmail.com
- Please attach contact information to the back of each piece or clearly describe each piece on reverse side of this form, thank you.