



# California Kidz Kitchen

## California State Fair • Summary Form

California Kidz Kitchen  
 California State Fair  
 P. O. Box 15649  
 Sacramento, CA 95852-1649  
 (916) 263-3146  
 entryoffice@calexpo.com

For Office Use
Ship No.

### Summary Form Instructions:

1. Refer to California Kidz Kitchen Competition Handbook for complete rules, conditions and entry deadlines.
2. Print or type all information where applicable.
3. Complete entire form except "For Office Use."
4. Provide Social Security Number. **Premiums will not be paid without this information.**
5. This form must: have all of the required signatures; be submitted by the entry deadline; be accompanied by all entry fees required; be accompanied by fully completed official entry form(s) as required for entry into competition.
6. Mail completed forms along with entry fees to the address above.

### Exhibitor Information:

<b>Social Security Number</b> _____ - _____ - _____
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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Phone (    ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

County \_\_\_\_\_

I hereby certify that all of the information submitted with my application to compete in the California Kidz Kitchen Competition are true and correct. I have been provided and read the electronic version (or a hardcopy) of the 2011 competition handbook, and will accept and comply with the rules as written.

Exhibitor's Signature \_\_\_\_\_ Date \_\_\_\_\_

### Organization Information:

*All Exhibitors complete the following:*

School Name \_\_\_\_\_ Grade in School: \_\_\_\_\_

Chapter or Club (if any) \_\_\_\_\_ Number of Projects Entered: \_\_\_\_\_

Instructor Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Instructor Phone (    ) \_\_\_\_\_ Email \_\_\_\_\_

Instructor Address \_\_\_\_\_

Instructor City \_\_\_\_\_ Instructor State \_\_\_\_\_ Instructor Zip \_\_\_\_\_

### **MUST have signature for all Exhibitors**

Parent/Instructor/Leader Signature \_\_\_\_\_  
 "I hereby certify that this exhibitor is eligible to compete with the entry(s) listed on the official entry form(s)"

### For Office Use:

Bates No	Date	Check Number	Name on Check	Amount

Last Name \_\_\_\_\_  
 First Name \_\_\_\_\_



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## California State Fair ★ Entry Form

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2. Print or type all information where applicable.
3. Provide Social Security Number. **Premiums will not be paid without this information.**
4. Complete entire form except "For Office Use."
5. Use a separate entry form for each division.
6. Be sure to sign each entry form.
7. Entry forms must be accompanied by a summary form for each exhibitor.
8. Mail completed forms along with entry fees to the address above.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

<b>Social Security Number</b>	_____ - _____ - _____
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I hereby certify that all of the information submitted with my application to compete in the following entry(s) are true and correct. I have been provided and read the electronic version (or a hardcopy) of the 2011 competition handbook, and will accept and comply with the rules as written.

Exhibitor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Instructor/Leader Signature \_\_\_\_\_  
 "I hereby certify that this exhibitor is eligible to compete with the entry(s) listed on this form"

### Please select one option

- Exhibitor delivery
  Teacher delivery
  Mail Delivery

**PLEASE USE A SEPARATE FORM FOR EACH DIVISION**

### Entry 1 Information:

Division No.	Class No.	Title—maximum 30 characters	Entry No.	Entry Fee
Special information to be included for entry or comments: _____				

### Entry 2 Information:

Division No.	Class No.	Title—Maximum 30 characters	Entry No.	Entry Fee
Special information to be included for entry or comments: _____				

Last Name

First Name

Division

Class