



The Professional Baking Competition

Application Form

America's Baking and Sweets Show

PLEASE PRINT ALL INFORMATION AND USE ONLY ONE FORM FOR EACH CATEGORY.
Entries are non-refundable.

Please print clearly

FIRST NAME: _____ SURNAME: _____

BUSINESS NAME: _____

(Only the exhibitor's business name will be recognized at the show; non-exhibitor recognized by personal name only.)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: (_____) _____ - _____ MOBILE: (_____) _____ - _____

EMAIL: _____

CATEGORY: _____

Exhibitors: No charge entry fees for any category.

Non-Exhibitors: Entry Fees \$20.00 per category. TOTAL ENCLOSED: \$ _____

Please return this form by mail, fax or email to:



America's Baking and Sweets Show

836 S. Arlington Heights Road, #204

Elk Grove Village, IL 60007

Tel: 312 450-2574 Fax: 877 709-5130

fedele@americasbakingandsweetsshow.com

CHECK

Make check payable to: America's Baking and Sweets Show.
\$25.00 charge for returned checks.

VISA

MASTERCARD

CREDIT CARD NUMBER: _____

EXPIRY DATE: _____ / _____ CVC#: _____

CARD HOLDER'S NAME
NAME (PRINT): _____

SIGNATURE: _____

RELEASE OF LIABILITY/PHOTO RELEASE

By signing this application, I hereby give permission of my entry/entries to be photographed and published by the press for promotion of America's Baking and Sweets Show. I hereby agree to abide by the rules and regulations of the show, including not removing my entry /entries before the close of the show. I understand that neither America's Baking and Sweets Show nor the Renaissance Schaumburg Convention Center assumes any responsibility for loss, theft or damage to displays or personal items at the show. I will abide by the decisions of the judges. I understand that failure to comply with any rule will result in my entry being disqualified.

SIGNATURE _____ DATE _____