BUCKEYE STATE BUTTON SOCIETY

Do not write here
_____
ENTRANT NO.

LIST OF ENTRIES for ____ Competition

AWARD NO.	DIVISION.	CLASSIFICATION NO.	SIZE	DESCRIPTION

Please fill out in **numeric order**.

I acknowledge by signing this application for entries:

My name and entrant number may be posted at the Show after judging. ☐ Yes ☐ No

My tray(s) may be photographed at the Show for publication. ☐ Yes ☐ No

Someone other than myself will be delivering / picking up my tray(s). ☐ Yes ☐ No

I authorize _____ to pick up my tray(s).

Although it is the policy of the Buckeye State Button Society to handle all entries with utmost care, I hereby agree to hold the Society harmless in case of accident, loss or damage to the buttons I have entered in competition.

Name _____ Signature _____

Address _____

Telephone _____ Cell _____ Email _____

Checked In by: _____ Checked Out by: _____

Checked Out Trays Received by:

Name _____ Signature _____

Printable and online interactive versions of this form are available at http://www.ohiobuttons.org/Forms.html