­­­­­­­­­­­­­­­­­­­ **Scarecrow Competition - Entry Form**

**This form must be completed and received by 31st May 2019 if you wish your Scarecrow to be judged in the competition.**

**Your Scarecrow should be on display from 12 noon on Sunday 2nd June until 8pm on Sunday 9th June**

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| --- | --- |
| **Your Name**  |  |
| **Age Category, please indicate 🗸****(If 11 and under, Parent or Guardian’s name required here)****……………………………………………** | **11 and under****18 and under****Adult** |
| **Name of others involved in construction** |  |
| **Contact Telephone Number** |  |
| **Email Address** |  |
| **Postal Address and where Scarecrow is to be displayed\*** |  |
| **Tell us about your Scarecrow –****e.g.- Has it been given a name?** |  |

**\*This form must be signed by the owner or occupier of the address where the Scarecrow is to be exhibited.**

**Name………………………………………………….**  **Date………………………....**

**When completed please send to –** **scarecrow@galleywood.org**