

October 6, 2018

Please select contest to enter: <input type="checkbox"/> Little Abe <input type="checkbox"/> Little Sarah <input type="checkbox"/> Costumed Family		
Participant Name(s): _____		
Age: _____	Phone: (_____) _____	- _____
Address: _____		
_____	_____	_____
<i>city</i>	<i>state</i>	<i>zip</i>
Email address: _____		

CONTESTANTS MUST PRE-REGISTER BY Monday, October 1st, BY 4 P.M.

- Little Abe:** Open to all boys in the following divisions: Ages 3-6, Ages 7-10
Little Sarah: Open to all girls in the following divisions: Ages 3-6, Ages 7-10
Best Costumed Family Group: Open to any family, with at least three (3) members dressed in pioneer or antebellum costumes.

Each participant must submit with their application a 3 x 5 index card with a brief description of their costume and/or props. Please staple the card to this application form. All contestants are encouraged to use props such as books, dolls, etc. to give their costumes period authenticity.

All entrants receive a participatory ribbon.

First Place winners will ride on a float in the Lincoln Days Parade on Saturday, October 6 at 2 p.m.

Prizes for Little Abe and Sarah are as follows:

First Place: \$15 cash prize **Second Place:** \$10 cash prize **Third Place:** \$5 cash prize

In consideration of you accepting my entry and my participation in this Lincoln Days activity, I, intending to be legally bound, do hereby for myself, my heirs, my executors, administrators or assigns do hereby waive and release forever any and all rights and claims for damages I may accrue against any and all persons, businesses, agencies and other participants including, but not limited to, Lincoln Days Celebration, Inc., its officers and Board of Directors, organizers, sponsors, workers, officials, volunteer helpers, the City of Hodgenville, LaRue County, Kentucky and all others involved with this event, their successors, representatives, and assigns, growing out of my participation in any Lincoln Days events, including travel to and from this location. I also certify that I have full knowledge to the risks involved and that I am of at least 18 years of age or parent or legal guardian of the participant. I further certify by my signature that I assume full responsibility and liability for all persons whose names are listed on this form.

Signature _____ Date: _____

Return to: Mail:
 PO Box 176
 Hodgenville, KY 42748

Office:
60 Lincoln Square
Hodgenville, KY 42748

E-mail:
info@lincolndays.org