



P.O. box 709 ~ 315 Holdrege Ave ~ Basin, Wyoming 82410

Office (307)568-2968 ~ Fax (307)568-2938

Email: fair@bighorncountywy.gov ~ Website: www.bighornfair.com

## Tablescaping Contest Rules

- Age groups (ages are as of January 1st of the current year):
  - 10 yrs & under - 10 Entries
  - 11 yrs - 18 yrs - 10 Entries
  - 19 yrs and up - 10 Entries
  - Business - 5 Entries
- The Big Horn County Fair will only provide the table. Individual exhibitors will be limited to a 48"x30" (half table) space to decorate. Businesses will be allowed 96"x30" (full table) space to decorate.
- Each exhibitor is responsible for providing all dishes, centerpieces, tablecloths, china, crystal, silver, and any other decorations. Chairs will not be included in the display. No food items or live flowers please.
- Each display **MUST** include a menu to compliment the tablescape theme. Invitations are optional.
- Exhibitors must set a minimum of one place setting in their tablescape.
- The fair is not responsible for any broken, damaged, lost, or stolen items.
- Tablescapes will set-up will begin at **11AM on Wednesday, July 31st**. Tablescape setup must be completed by 1PM on 1st place recipients for each age category will receive a \$50 prize.
- The fair reserves the right to reject any tablescape that is objectionable or unsuitable.
- Tables will be on display on **Wednesday, July 31st - Saturday, August 3rd**. All tablescapes must be cleaned up by **12PM on Monday, August 5th**. Any items not picked up by **12PM on Monday, August 5th** will be dismantled by fair staff and left unattended.
- 1st place recipients for each age category will receive a \$50 prize. 2nd place recipients for each age category will receive a \$25 prize. The people's choice winner will be awarded a \$50 prize. The business category winners will receive a traveling trophy.
- Exhibitors must register by **July 29, 2024**. There is no entry fee.

Application:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent's Phone No. \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Participants Signature: \_\_\_\_\_ Date: \_\_\_\_\_