



2019 Ashland



Baking Contest

Register: 10:00 a.m.
Judging: 11:00 a.m.
Where: Small Pavilion

To Sign Up Please Provide:

Name: _____

Address: _____

Phone: _____

Type of Entry (only one entry per category per person):

- Yeast Creation: _____
- Cake: _____
- Pie: _____
- Cookie: _____
- Other: _____

Return this form to:

Ashland City Hall
Attn: Ashland Fall Festival
109 E. Broadway, PO Box 135
Ashland, MO 65010

or

ashlandfallfest@gmail.com