WARD FOUNDATION, SALISBURY UNIVERSITY
909 S. Schumaker Drive, Salisbury, MD 21804 ▪ 410-742-4988 ▪ www.wardmuseum.org

White Tape

2018 Registration Form
WORLD

CARVER'S NUMBER

W

Last _____ First _____ Initial ____

Address _____ City _____

State/Province _____ Country _____ Zip _____ Phone Number _____

E-mail Address _____

DIVISION A - Decorative Life-size Wildfowl: John Scheeler Memorial Award

Species _____

Title _____

Description _____

DIVISION B - Decorative Life-size Waterfowl Pair

Species _____

Title _____

Description _____

DIVISION C - Decorative Miniature Wildfowl

Species _____

Title _____

Description _____

DIVISION D - Interpretive Wood Sculpture

Species _____

Title _____

Description _____

DIVISION SR - Shootin' Rig : Jimmie Vizier Memorial Award

Species _____

Title _____

Description _____

Entrants are limited to 1 entry in each category.

I agree that the above entries will not be removed until after 4 p.m., April 29, 2018. I certify that all entries submitted by me are in accordance with the published rules and that I absolve The Ward Foundation from any loss or damage to my entries. I agree to allow my entries to be photographed by photographers authorized by the Ward Foundation and to the distribution of such photographs at the Foundation's discretion. I agree that any and all of my World Division entries winning first place will be placed on loan to the Ward Museum of Wildfowl Art for a period of one year immediately following this competition. The carving(s) must be retrieved from the Ward Museum by the owner at the time of next year's competition. A separate loan agreement for the first place World Championship carving(s) will be completed and signed by both parties at the close of the competition. **This is your receipt. You must have it visibly in your possession when you remove your entries on Sunday, April 29th.**

Division		Fee	x Number	= Total
1st entry A, B, C, D & SR		$ 150.00	( )	$
Membership **check one**	Active	New/Renew	Surcharge	$
Extra Badge Fee		Member $ 5.00	Non-Member $10.00	$
		TOTAL FEES DUE		**$**

Cash **Credit Card** **Check #**_____

*** IRS Form W-9 will be passed out at the hospitality room from noon-2pm on Sunday. It must be completed and given to the accountant prior to receiving monetary award.**

Signature of Artist / Delivery Person_____ Date_____

Bottom Copy to Artist

NOTE: ALL NON-MEMBERS WILL BE CHARGED A SURCHARGE OF $10 TO ENTER THE 2018 COMPETITION.