



Scoops Ice Cream Eating Competition

Contestant Registration Form

Name: _____ Age: _____
 Address: _____ Phone: _____
 City: _____ State: _____ Zip: _____
 Email: _____

Contestant Rules:

1. All entries must be received and paid for prior to the date of competition.
2. Must eat all the contents of the container. Except the gummy worm!
3. Must not lose the spoon.
4. No dropping ice cream allowed.
5. Fastest time wins.
6. Have fun and good luck.
7. Choose your favorite ice cream: (limited by availability)

<input type="checkbox"/>	1. Vanilla	<input type="checkbox"/>	2. Chocolate
<input type="checkbox"/>	3. Death by Chocolate	<input type="checkbox"/>	4. Blue Moon
<input type="checkbox"/>	5. Salted Caramel	<input type="checkbox"/>	6. Birthday cake
<input type="checkbox"/>	7. Caramel Cashew	<input type="checkbox"/>	8. Mint Chip
<input type="checkbox"/>	9. Butter Pecan	<input type="checkbox"/>	10. Butter Crunch
<input type="checkbox"/>	11. Raspberry Fudge Torte	<input type="checkbox"/>	12. Cookies and Cream
<input type="checkbox"/>	13. Black Cherry	<input type="checkbox"/>	14. Bear Bait
<input type="checkbox"/>	15. Cookie Dough	<input type="checkbox"/>	16. Black Raspberry

Entry fees:(cash only)

1. Under 10, \$3
2. Under 16, \$4
3. Over 16, \$5

Prizes

1. Under 10, winner \$15 gift card and shirt
2. Under 16, winner \$25 gift card and shirt
3. Over 16, winner 2 Milwaukee Brewers tickets, shirt and a \$25 gift card.

I, _____ agree that I have entered this contest by my own will. I agree to sign a liability waiver.

Please submit in person for payment.

Office use only

PAID: YES ___ NO ___ Date: _____ Processed by: _____