

Registration for Fleischmanns Maple Fest Bake-Off Contest

Name of Baker: _____

Address: _____

Phone Number: _____

Name of Entry: _____

Category (circle one)

- a. Traditional Baked Good
- b. Gluten Free
- c. Low fat
- d. Multi generational two person team entry

All ingredients in this dish: _____

Additional Comments: _____
