



**Application for the 2019 MAPACA Jubilee
Fleece to Shawl Competition**

Name of Group: _____

Names of Participants and Skill:

Participant: _____ Skill: _____

Participant: _____ Skill: _____

Participant: _____ Skill: _____

Participant: _____ Skill: _____

Participant: _____ Skill: _____

Contact Address: _____

Contact Phone Number: _____

Contact Email: _____

***It is understood and agreed that the Mid-Atlantic Alpaca Association or any of its sponsors, agents, or employees shall not be held responsible for any loss, damage or injury to any person, property or animal which is caused directly or indirectly by any reason. The undersigned also agree to hold harmless the above parties for any expenses or liabilities incurred, including but not limited to attorney's fees.

Please have all participants in your group sign and print their names below to acknowledge the above liability release.



Participant Name _____

Participant Signature _____

Participant Name _____

Participant Signature _____

Participant Name _____

Participant Signature _____

Participant Name _____

Participant Signature _____

Participant Name _____

Participant Signature _____

Mail this application to:

Chris Reachard, Jubilee Fiber Coordinator, 2952 Dusty Road, Seaford, DE 19973.

Questions or Comments? Contact Chris at (302) 629-6489 or candcalpaca@gmail.com

Date submitted: _____

Date Received: _____

Received By: _____