



## 2013 4-H Food Challenge Registration Form

Contest Date: **November 19, 2013**

Location: **Travis County Extension Office – unless otherwise noted**

Cost: **\$8.00 per team**

Please list your team below (*a team consists of 3-5 members and all must be within the same age division: 8-10 year olds, 11-13 year olds and 14-18 year olds and all ages are as of August 31, 2013*)

**Team Name:** \_\_\_\_\_

**Team Captain:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Team Member 2:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Team Member 3:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Team Member 4:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Team Member 5:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**4-H Club:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

Please mail completed form and payment of \$ 8.00 by **November 14, 2013** to:

Travis County Extension Office  
Attn: John Riegler  
1600 B Smith Road  
Austin, TX 78721

I attest we have read the Rules and Guidelines, including the Supply Box list for the Food Challenge.

**Team Captain signature:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

**CEA or AST:** \_\_\_\_\_