

2009 New Jersey Peach Bake-Off

Date of Contest: Saturday, July 25, 2009

Name of Contestant: _____

Address: _____

Phone Number: _____

Name of Recipe: _____

By signing below, I give my permission for the New Jersey Peach Festival Committee to use my recipe for the 2008 New Jersey Peach Recipe Book.

Signature: _____ Date: _____

Return this application form by July 21, 2009 to:

**Tracy Duffield
519 Greentree Road
Sewell, NJ 08080
(856)-881-1411**

Important Information

*If application is not mailed by July 21, 2009, participants may enter at the Peach Tent up until the day of the contest.

*Entry fee is \$10.00 per recipe.

*All baked goods must be dropped off at the Peach Tent by 10:30 A.M. in order to be judged by 11:30 A.M.

*Winners will be announced at 12:30 P.M.

*Prizes can be picked up at the Peach Tent after winners are announced the day of the contest.