

# 2017 Indiana State Corn Husking Contest Registration Form

## Please Print

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex (Male or Female) \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Email (opt.) \_\_\_\_\_

\_\_\_\_\_ Enclosed is my \$20 check (*payable to the Indiana State Corn Husker's Association*)  
for my 2017 husking fee registration and membership in ISCHA.

\_\_\_\_\_ Yes. I want to make a contribution to the ISCHA, but not compete in the husking contest  
Contribution amount \$ \_\_\_\_\_

(Choose one) \_\_\_\_\_ I am a **RIGHT**-handed picker. \_\_\_\_\_ I am a **LEFT**-handed picker.

## Please circle the class you plan to enter

Boy's (Youth 14 & Under)

Girl's (Youth 14 & Under)

**Handicap** (at any age)

Boy's (Youth 15-20)

Girl's (Youth 15-20)

**Novice**- first time competitors (Only  
available at the State Contest and not  
eligible to compete at Nationals)

Young Men's (21-49)

Young Women's (21-49)

Men's Open (any age)

Women's Open (any age)

Men's Senior (50 & up)

Women's Senior (50 & up)

Men's Golden Agers (75 & up)

Women's Golden Agers (75 & up)

**Team Husking** (4 competitors; may  
also compete in an individual class)

## Contestants Liability Waiver

*In consideration of being allowed to participate in the Indiana State Corn Husking Contest, I waive and release any and all rights and claims for damages of any kind that I may have against all entrants; all volunteers; the Indiana State Corn Husking Association and its officers, employees, agents, directors or representatives; the farm owner and/or operator; contest officials and any other persons or entity associated with the contest. This document is binding upon my heirs, executors, administrators, successors and assigns. I understand and agree that if I am injured or my property is injured, damaged, or lost, that I will make no claim against the sponsors or any other person or entity associated with the contest and that I cannot change my mind at a later date. I voluntarily assume the risk of participating in this event.*

\_\_\_\_\_  
Contestant's signature

\_\_\_\_\_  
Witness signature

\_\_\_\_\_  
Date (Month / Day / Year)

For early registration to reserve your place in the competition, mail a completed registration form including the non-refundable registration fee of \$20 (*made payable to the Indiana State Corn Husker's Association*) to the treasurer:

Richard Hinton  
Indiana State Corn Husking Association  
801 Huntington Ave., Warren, IN 46792  
(phone) 260-358-7188