



Contestant # \_\_\_\_\_

Year \_\_\_\_\_

**OXFORD FAIR WOODSMEN DAY – REGISTRATION**

**Contestant Fee: \$20—checks payable to Oxford Fair**

(Entries must be in by August 30th)

Name (please print) \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ T Shirt Size: \_\_\_\_\_

Email \_\_\_\_\_

**\*Waiver at the bottom of this form MUST be signed\*** (Can be copied)

Mark appropriate boxes for events to enter.

- |                          |                          |                          |                    |   |
|--------------------------|--------------------------|--------------------------|--------------------|---|
|                          | (M) MEN'S EVENTS         | (MA) MASTER'S EVENTS     | (W) WOMEN'S EVENTS |   |
| M                        | MA                       | W                        |                    |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | Log Roll (Partner's Name) _____   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | Underhand Chop (block numbers drawn at check-in)                                  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | Bucksaw   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | Ax Throw  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | Crosscut (Partner's Name) _____   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | Chainsaw—stock saw (saw to be provided for event)<br>open to anyone not in 1 or 2 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | Chainsaw 1 – stock appearing** (May enter only one of chainsaw 1 or 2)            |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | Chainsaw 2– Hot saw **Super Saw   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | Tree Fell      Tree numbers to be drawn at check in.                              |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | Jack & Jill Crosscut (Partner's Name) _____                                       |

**WAIVER AND RELEASE FROM LIABILITY**

\*I, the undersigned, assume full and complete responsibility for all personal injury and /or loss or damage to personal equipment I may incurs a result a of participation in the events listed above.

\*I further hereby completely release and hold harmless the Oxford County Agricultural Society, all sponsors and any personnel associated with the event, contest administrators, judges, timers.

\*I hereby agree to indemnify and save and hold harmless the releases and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in or upon the restricted area or in any way competing, officiating, observing, or working for, or for any purpose participating in the event and whether caused by the negligence of the releases or otherwise.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

(Jack and Jill Partner- If Jill does NOT compete in any other contest.)

Return this along with the contestant fee to:

**Elaine Emery  
90 High Street  
West Paris, ME 04289**

**Telephone: 207-674-2694  
elaine90@megalink.net**