

NEWPORT FALL FOLIAGE FESTIVAL



Scarecrow Contest

OFFICIAL ENTRY FORM

Business: _____

Name: _____

Address: _____

Email: _____

Phone: _____

Name of Scarecrow: _____

Send Entry Form to:
info@newportrecreation.org

Or mail to

Scarecrow Contest, Newport Parks & Recreation, 222 Main St., Newport, VT 05855
