2017 WORLD-WIDE MUSTARD COMPETITION

Sponsored by The National Mustard Museum

Company Name:		
Address:		
City:	State/Province:	Zip/Postal Code
Country:	Telephone:	
Contact Person:		
Email address of contact	person:	
CATEGORY ENTERED: Please use a separate for	m for each entry.	
Full Name of Mustard Ent	ered:	
For each entry, sen	d this form, 12 jars (minimum weight 3.5	5 oz or 100 gm each), and \$40 to
	NATIONAL MUSTARD MUS 7477 HUBBARD AVENU MIDDLETON, WI 53562 U	E
6	•	3-9797 (fax)
·	curator@mustardmuseum.	•
	Deadline for Entries: March	n 9, 2017
-	ars and drawn on U.S. banks, should be	made out to
You may also pay by credit o	card (V/MC/D/AMEX):	
Credit Card Number:		Exp. Date:
Signature is required for crewith your credit card number	• •	or email the National Mustard Museum

You can also pay with your credit card or with PayPal on our website, **www.mustardmuseum.com.** In the search box, enter "2017CFEE" and "order" as many entries at \$40 each as you wish. If you are shipping from outside the U.S. make the National Mustard Museum at the above address the ship-to address for your online payment.