



## GREENFIELD RECREATION DEPARTMENT

20 Sanderson Street, Greenfield, MA 01301  
PHONE (413) 772-1553 ☎ FAX (413) 773-0115  
[www.greenfieldrecreation.com](http://www.greenfieldrecreation.com)  
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# Cookie Bake-Off

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- I. **Entry Requirements**
  - a. The Cookie Bake-Off is open to anyone.
  - b. Must complete contact information form and provide a list of any allergens that may be contained
  
- II. **Cookies**
  - a. Participants must bring a minimum of 2 dozen cookies to Beacon Field at the Beacon Street parking lot between **11:30-12:00pm on Sunday, February 4<sup>th</sup>**.
  - b. Each participant is responsible for bringing cookies on a serving tray. Tray should be labeled with your name and phone number.
  - c. Volunteers will distribute the cookies to the public for judging.
  - d. Napkins will be provided.
  
- III. **Judging**
  - a. Each entry will be assigned a “contest number” to ensure a blind vote.
  - b. The general public will judge the contest and prizes will be awarded in three categories: Most Original, Best Overall, and Best Decorated!
  - c. Taste testing will take place from 12:00pm until cookies run out.
  - d. Winners will be announced at approximately 3:45pm
  
- IV. **Clean Up**
  - a. Trays/platters must be picked up at 4:00pm.
  - b. Any items left behind will be discarded.

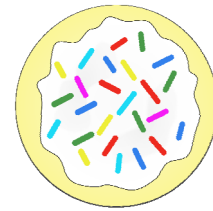


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## GREENFIELD WINTER CARNIVAL COOKIE BAKE-OFF PARTICIPATION FORM SUNDAY, FEBRUARY 4<sup>TH</sup>, 2024



**DROP OFF 2 DOZEN COOKIES  
AT THE BEACON STREET PARKING LOT OF BEACON FIELD  
ON SUNDAY, FEBRUARY 4<sup>TH</sup>, AT 12:00PM**

### CONTACT INFORMATION:

Entry Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### PLEASE CHECK ALL THAT APPLY REGARDING YOUR COOKIE ENTRY:

#### Allergens

Contains:  Dairy  Eggs  Tree Nuts  Peanuts  Shellfish  
 Wheat  Soy  Fish  Other: \_\_\_\_\_