

MIWW ENTRY FORM: NATIONAL, STATE, & DISTRICT

Name (type or print) _____
Mailing Address _____
City _____ State _____ Zipcode _____
District Number (if applicable) (Not applicable) _____ Contest Date November 19, 2022
Home Phone (_____) _____ Cell Phone (_____) _____
Email Address _____
Birth Date _____
Month / Day / Year _____ Age on Jan 1 of current year _____



Age Division or Category: Check one only. Age Division is determined by your age on January 1 of the current year.

____ Preteen (12 & under) ____ Junior (13-16) ____ Senior (17-24)
____ Adult (25 & older)

Garments: Check one and **list the piece(s)** you are making.

____ 1-Piece Garment _____
____ 2-Piece Outfit _____
____ Ensemble – 3 or more pieces worn at the same time _____

Pattern(s) Used:

Pattern Co. & Number _____
Pattern Co. & Number _____
Pattern Co. & Number _____

Total of number of **Yards** Wool / Wool Blend **Fabric** Used _____

Total of number of **Skeins** Wool / Wool Blend **Yarns** Used _____

Manufacturer of Sewing Machine Used _____

Manufacturer of Serger Used _____

My fabric(s)/yarn(s) have been lab/state **tested:** ____ Yes ____ No (Fabrics/yarns must test at least 60% wool fiber)

If Yes: Lab/state Test Number _____ % Wool _____ Description of Wool _____
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Print and Mail this form with:

- a 3" x 3" sample of each wool fabric and/or 12" of each yarn used
- a \$12 entry fee for each Age Division or Category (Checks payable to: National MIWW)
- **Mail to National MIWW • P.O. Box 215 • Encampment, WY 82325**

Mail a second copy of this form with:

- TWO 5" x 5" fabric swatches and 36" yarn sample(s) to your State Director with applicable fees (for testing and/or state fee).
- Send \$5 along with second copy for Wool testing fee. Make check payable to Idaho MIWW.

Entry form may be copied as needed. Use a separate form for each entry. Read brochure/website for further details.

ENTRY FEES ARE NON-REFUNDABLE. YOUR ENTRY IS NOT COMPLETE WITHOUT ALL INFORMATION, FABRIC SAMPLES, AND ENTRY FEES. MIWW is not responsible for late, misdirected or lost entries

In consideration of being accepted to compete at any level (district, state or national) in the Make It With Wool program, I agree to abide by all rules set forth in the Official MIWW Entry Brochure and the rules and regulations of those in charge. I will accept the decision of the judges as final. I further agree that those in charge will have the right to eliminate me if I fail to comply with said rules. I hereby certify that I **personally** selected and made this garment. It is my own planning and workmanship. My garment(s) are made from a minimum of 60% loomed, knitted, crocheted or felted wool fabric or yarn.

Contestant Signature _____ Date _____

Parent/Legal Guardian signature, if contestant is a minor _____

Check the box to give MIWW permission to use photograph(s) of contestant for promotion of the MIWW contest.

Visit the website for additional information and guidelines: www.makeitwithwool.com