



# Gingerbread

## HOUSE DECORATING CONTEST

Grab some blue prints, frosting, and gumdrops; it's time to make some gingerbread! Here's a chance to bring the whole family together and spend some quality time in the kitchen. All ages welcome! Be creative and have fun with your construction and embellishments. We want to see where your imagination takes you. Think unique, and be innovative with your design or theme. Engineer a school, a church, an igloo or even a gingerbread high-rise—it's up to YOU! Please be sure to include a brief description of your gingerbread masterpiece and architectural secrets.

- **\$5 Entry Fee**
- **Submittal Deadline: Dec. 1st - 3rd at 4:30pm at Chanhassen City Hall**
- **Contact Priya Tandon at 952.227.1122 or [ptandon@ci.chanhassen.mn.us](mailto:ptandon@ci.chanhassen.mn.us) to schedule your drop-off time**
- **Winner Categories: Most Difficult and Most Creative**
- **Houses will be displayed online via Facebook at the conclusion of the contest**
- **Prizes will be awarded for the most difficult and most creative houses**

Participant's Name _____	Date of Birth _____
Participant's Name _____	_____
Participant's Name _____	_____
Address _____	
City, State & Zip _____	
Home Phone _____	Alt. Phone (cell, work, etc.) _____
E-mail Address _____	

I, the participant, do hereby agree to participate in the above-mentioned activity and I further agree to indemnify and hold harmless from and against any and all liability for injury which may be suffered by the aforementioned individual(s) arising out of, or in any way with, his/her participation in this activity. I do hereby allow the City of Chanhassen to use any photographs taken by the city of the individual(s) named herein in city informational bulletins released to the general public for the period of one year from the date I have signed below. Data Privacy Policy: The information requested on the registration form will be used to verify eligibility and determine staff, facility, and equipment needs. You/your child's name, sex, birthdate, address, phone number and health information will be provided to city staff, volunteers, the city attorney, insurer, and auditor. Although you are not legally required to disclose this information, failure to do so will prevent you from participating in the program.

**Participant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Payment - Check One**    Cash:     Check:

**PLEASE MAKE CHECKS PAYABLE TO THE CITY OF CHANHASSEN**