



Presents

Harrison Museum of African American Culture's

DESSERT CONTEST

Categories - Pies, Cakes and other Deserts



PRIZES TO BE AWARDED DAY OF FESTIVAL

Chef's Choice - \$100.00



PEOPLE'S CHOICE AWARD

- First Place - \$ 75.00
- Second Place \$ 50.00
- Third Place \$ 25.00

Date: September 15, 2018

Location: Elmwood Park



Dessert Bakeoff - 2018

Official Contest Rules and Entry Form

Who's Eligible?

Participants and tasters must be 16 years or older. **Professional bakers are not eligible.**

How to Enter

Fill out an entry form and drop it by the Harrison Museum of African American Culture - 1 Market Square SE, Second Floor by 4:00 pm by **Sept. 7, 2018**. You may also mail this entry form to the address below:

Harrison Museum of African American Culture
P O Box 12544
Roanoke, VA 24026

You may also pick up the Entry Form in the office or on line.

Recipes

All desserts must be thoroughly cooked. Printed recipes are also required by the judging chefs.

Nuts are permitted. **The HMAAC will not be held responsible for inaccurate labeling of items containing nuts or derivatives**

Recipes for entry must be emailed to harrisonmuseum.com prior to the judging or typed/neatly written on a separate piece of paper and submitted with the dessert at drop off site.

List all ingredients in the order used with exact measurements and package sizes. Submit complete directions including times, temperatures and number of servings, if your recipe is not your own invention, please give credit to its source.

Recipes may be published, at the HMAAC's discretion, with entrants' recognition, without further compensation

For the participants on September 15, 2018:

Bring small/bite sized (no bigger than 1 inch, if possible) portions of your dessert. We will provide a disposable container for your samples. We suggest you bring a knife and plastic wrap if you plan on cutting your dessert after drop-off. **Small cups will be provided for you to place your samples into.**



DESSERT Bake Off

Entry Form

Entry is due at the Harrison Museum of African American Culture by 4:00 pm, September 7, 2018.

Your Name _____

Your Address _____

City _____ State: _____ Zip Code _____

Phone, Home: _____ Cell: _____

Email Address: _____

YOUR DESSERT: _____

Agreement of Official Rules: By participating in this contest each entrant unconditionally accepts these official rules and the decision of the judges, promoters, and administrators. Failure to comply could result in disqualifying the pie entry.

Signature _____ Date _____

Return to:

Harrison Museum of African American Culture
P O Box 12544
Roanoke, VA 24026
Phone: 540- 857 – 4395
Email: *harrisonmuseum.com*

FOR OFFICIAL USE ONLY:

Date Received _____

Person Receiving Form _____

Signature: _____