

Lively Local Form

This form **MUST** arrive at our office by March 10, 2017 in order for your team to be considered for the Lively Local Award. No exceptions!



Team Name: _____

Team Coach: _____

Local Product <small>(apples, maple syrup, cornmeal, etc...)</small>	Recipe Quantity <small>($\frac{1}{4}$ cup or greater)</small>	Name of Farm/ Farmer*	Location
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Coach Signature: _____

* If you order ingredients through a wholesale distributor or Co-op, please ask who grew the product and list on the form.

Mail this form to: Amy Gifford, Jr Iron Chef VT, PO Box 697, Richmond, VT 05477