



Gingerbread Village Contract

Name of business/individual: _____

Contact person: _____

Mailing address: _____

City: _____ State: _____ ZIP: _____

Phone (Office): _____ (Home): _____ (Cell): _____

Email: _____

Entry Category: Business Group/Youth (age 1-17) Group/Adult (18+) Individual
 School/Elem School/Middle School/High

1. I agree to donate to the Fantasy of Trees the following number and size of house(s) and inform the Fantasy of Trees office of any changes to entries:

Large (24" x 24") Medium (18" x 18") Small (12" x 12") Mini (10" x 10")

How Many: _____

- a. Structure base to be made of solid 3/8" plywood cut to selected size category (see below).
- b. Main structure/design is to cover 2/3 or more of the base. Remaining base area can be used as landscape design.
- c. A business card (2" x 3 1/2 ") to be placed on the front right corner. Please leave this area clear/undecorated.
- d. Additional guidelines as noted on information sheet:

Large	Medium	Small	Mini
24" x 24" base	18" x 18" base	12" x 12" base	10" x 10" base
Earns 6 tickets per house	Earns 4 tickets per house	Earns 3 tickets per house	Earns 2 tickets per house

2. Please print the name you want on the display sign: _____

3. I agree to leave a space the size of a business card (2" x 3 1/2") clear of decoration/frosting on the front right corner of my gingerbread house base.

4. I understand that my house(s) are tax deductible donations to the Fantasy of Trees for the benefit of Children's Hospital and that upon the Opening Night P review party the Fantasy of Trees/Children's Hospital has all rights to sell, auction or otherwise dispose of said item(s).

5. I agree to adhere to all guidelines for bakers as outlined by the Fantasy of Trees and I understand that the Fantasy of Trees reserves the right to impose additional rules and regulations applicable to this area. All materials (except for the display board) must be edible.

6. I understand that the Fantasy of Trees shall have the right to establish and enforce quality control of designs and decorations in order to maintain a high standard of excellence.

7. I understand that all Gingerbread Village donors receive the following:
- a. Acknowledgement as a contributor to Fantasy of Trees
 - b. Complimentary ticket(s) to the Fantasy of Trees based on gingerbread house size and available upon delivery of house(s).

Drop Off: Please Initial: _____

- a. All gingerbread houses are to be dropped off on Sunday before Thanksgiving between 1 p.m. and 4 p.m. at the Knoxville Convention Center.
- b. Show tickets will be distributed at that time.

Signed: _____ (Donor) _____ (Fantasy of Trees)

_____ (Date) _____ (Date)

Mail to: Fantasy of Trees-Gingerbread Village, c/o Children's Hospital, P.O. Box 15010, Knoxville, Tn 37901 • Phone: (865) 541-8488 • Fax: (865) 541-8285

FOR OFFICE USE ONLY

Date _____ Book _____ List _____ Confirmation _____