

# 39<sup>th</sup> Annual Smoky Mtn. Model-Con

Knoxville Scale Modelers Association

## Official Model CONTEST REGISTRATION Form

Entrant# \_\_\_\_\_  
(K SMA Use Only)

NAME \_\_\_\_\_  
(Please Print)

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ PHONE \_\_\_\_\_  
(With Area Code)

E-MAIL ADDRESS \_\_\_\_\_

### MODEL INFORMATION

#	Scale	Model	Category #
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

**WAIVER:** By entering this model, I hereby agree to the following: I certify that I did build the model as described above and that the Knoxville Scale Modelers Association and its members as well as the Knoxville Catholic High School and its staff will not be held liable for any damage to said model. Judges reserve the right to reassign a model into another category as deemed necessary. I understand that all decisions by the judges are final.

PARTICIPANTS SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_