

# MAF APPRENTICE COMPETITION FORM

2017 MAF ANNUAL CONVENTION

FRIDAY, SEPTEMBER 22, 2017 @ 7:00 AM

PREFERRED MATERIALS, 25061 OLD 41 ROAD, BONITA SPRINGS, FL 34135

**Yes! I would like to compete in the MAF State Apprentice Competition!**

## CONTESTANT INFORMATION

Contestant Name: \_\_\_\_\_

Employing Company: \_\_\_\_\_

Company Address: \_\_\_\_\_

Company City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Company Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Email Address: \_\_\_\_\_

Contestant Email Address: \_\_\_\_\_

Apprentice Program Location : \_\_\_\_\_ Level:  1  2  3

## CONTESTANT BIOGRAPHY:

How many years have you been in the masonry industry? \_\_\_\_\_

How did you get your start in the masonry industry? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The registration fee is \$250/contestant. The fee includes lunch, apprentice t-shirt and 1 Guest at the banquet.

Additional dinners are available at \$100 each. Use the form below to enter your guest names If you need more space please put the names on the back.:

Contestant: \_\_\_\_\_ \$ 250.00

Guest #1: \_\_\_\_\_ \$ (Included)

Guest # 2: \_\_\_\_\_ \$ 100.00

Guest #3: \_\_\_\_\_ \$ 100.00

Guest #4: \_\_\_\_\_ \$ 100.00

Please make your checks payable to: Masonry Association of Florida and mail to: PO Box 24474, Fort Lauderdale, FL 33307.

Thank you! If you need assistance, please contact Deb Bartolucci [deb@floridamaosnry.com](mailto:deb@floridamaosnry.com) or 954-295-9926!