

CONTESTANT APPLICATION

Contestant Name(s): Contact Person(s): Product Category & Name:			
		City:	State:
		Phone: _	Email:
<u>Contesta</u>	ant Recognition (may be more than one):		
•	Personal Representation: Y/N Collective/Coop/Disp. Representation: Y/N Business Representation: Y/N Anonymous: Y/ N		
Contesta	ant Category (please submit 1 separate form and samples for each entry) (up to 3 entries per category):		
(Circle th	ne Category)		
(Most st	oor Flower: Sativa Dominant, Indica Dominant or 50/50 Hybrid rains are hybrid and some hybrids are more difficult to determine Sativa or Indica dominance. The Hybrid is for these circumstances given the cultivators discretion or opinion.)		
2) Indoo	r Flower (artificial light): Sativa Dominant, Indica Dominant or 50/50 Hybrid		
3) CBD F	lower (at least 3% or more CBD complex)		
4) Conce	entrate: THC, Non-Solvent or CBD (At least 5% or more CBD complex)		
5) Vape:	THC or CBD (at least 5% or more CBD complex)		
6) Edible	es es		
7) Topic	al		
8) Tinctu	ures (New)		
9) Terpe	ne (New): Flower only (requires \$50 additional fee) (Judged by Lab % + Taste and Smell Score)		

Comments/ Product Description:



Pricing:

- \$200 cost of entry will cover lab testing and processing fees for flowers, concentrates, topicals, tinctures and edibles. (Includes 1 general admission ticket per contestant and your name will be included on our guest list)
- \$50 to be considered for the Terpene Category.

• Medical Cannabis Product Info:

- -3 entries per category are allowed per person. Entry may be public, anonymous or represent an entity
- -22 units of flower of at least 2 grams each (unlabeled)
- -22 units of concentrate in increments of at least .5-1 gram each (labeled)
- -22 units of edibles (labeled)
- -20 units of vape cartridges of at least .5 gram each + 2 grams in a container for easy testing (labeled)
- -22 individual units of topical (labeled)
- -22 individual units of tincture (labeled)
- -Must be received no later than October 18th. Contact us in advance if you cannot make this deadline and need assistance.

Payment Info:

-Entries must be submitted with entry fee in the form of cash, cashier's check or money order to:

Righteous Innovations

- -Submit the fee in a closed labeled envelope with your Contestant Application (page 1 only) and submit to the drop-off location with entry:
 - **Drop Off Location and Time** (Please adhere to time allocated for drop off):
- -Please drop off each entry in an individual package containing the contestant form, entry and payment to:

The Humboldt California Association 601 I St. Suite B Arcata, CA 95521 Mon-Fri: 10:00 am-12:00 pm (ONLY)

Sat-Sun: 12:00 pm-2:00 pm (ONLY)

Note:

- -Entries are due by October 18, 2017. Late entries may be accommodated if requested by email in advance.
- -Contestants may enter the medical cannabis if they are 18 years of age and with a doctor's recommendation.
- -All entries will be lab tested for molds and pesticides. Entries containing mold and pesticides will be disqualified. Some entries may be subject to second party lab testing if results are in question. Contact us for lab results if not online.
- -Donations for local veterans and compassionate care programs will be greatly appreciated-Please submit any donations in separate packaging labeled "donations". If okay with donor, we will acknowledge those who make a donation of 28 grams or more on www.HumboldtCountyCup.com.