

Arkansas Cup Information

Arkansas Cup Rules

The Arkansas Cup Design Contest will be at 8AM on Friday, August 18, 2017 at the Hot Springs Convention Center in Hot Springs, Arkansas.

1. The contestant must be an AFA member in good standing and has paid current year dues no later than July 24.
2. Previous first and second place design scholarship competition winners of the Scholarship Design Competition will be eligible to compete.
3. All AIFD members in good standing are eligible to compete.
4. You can win the Arkansas Cup title only three times.
5. Entry Fee is \$50.00

The Arkansas Cup Winner will receive:

1. Arkansas Cup Trophy
2. Bill Plummer Scholarship of \$500.00 to be paid upon completion of class and contingent upon eligibility, a Teleflora Scholarship Academy Class. (ELIGIBILITY FOR THE TELEFLORA SCHOLARSHIP REQUIRES TELEFLORA MEMBERSHIP AT THE TIME OF THE COMPETITION).
3. \$300.00 cash scholarship from Southern Wholesale
4. The Arkansas Cup Winner will represent Arkansas in the Mid-America Invitational Cup Competition in 2018 in Hot Springs, Arkansas.

Second place will receive a \$300.00 Gary Brewer Education Scholarship to be paid upon completion of class or classes.

All scholarship monies must be used at a school approved by the scholarship committee and will be paid upon proof of completion of school. Applicants will be notified when their application has been received and will receive rules and regulations in the mail.

THERE WILL BE NO REFUND IF A CONTESTANT DOES NOT SHOW FOR COMPETITION.

Questions or concerns, contact:

Kay Schlaefli AIFD, CFD, AMF

Expressions Flowers 112 Towson Avenue Fort Smith, AR 72901

Phone: 479-783-3210 Email: kay@expressionsflowers.com

Supporting and celebrating the floral industry in Arkansas and beyond.

Arkansas Cup Registration

Registration must be accompanied by \$50 registration fee. All entries must be postmarked no later than July 24, 2017.

ALL DEADLINES WILL BE STRICTLY ENFORCED. NO REFUNDS.

Name: _____

Email Address: _____

Physical Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Shop Name (if applicable): _____

Years in Floral Industry: _____

Freelancer () Shop Owner () Shop Employee () # Years Employed: _____

I certify that according to requirements listed above I am eligible to compete in the Arkansas Cup design competition.

Signature: _____

Date: _____

If employee of a member shop, the shop owner must authorize this registration by signing below:

Mail form and payment to: Kay Schlaefli AIFD, CFD, AMF, Expressions Flowers 112 Towson Avenue Fort Smith, AR 72901

All applicants for all competitions must be a member of the Arkansas Florists Association. All schools are subject to approval of the Scholarship Committee and scholarship checks will be awarded upon proof of completion of school.