

APPRENTICE CONTEST REGISTRATION IS NOT THROUGH THE STATE FAIR

MASONRY, ELECTRICAL, CARPENTRY, PLUMBING, HV/AC-R CONTEST
Apprenticeship Contest registration will open on August 1, 2024 and close at
11:59 pm on September 6, 2024.

For registration or contest questions, please contact the
ApprenticeshipNC Marketing and Communications Office:
spainhourm_tmp@nccommunitycolleges.edu or text 919-618-6249.

COSMETOLOGY CONTEST

Contestants must register online at SkillsUSAnc.org/state-fair-events
on or before October 11, 2024.

All Apprentice contestants are required to read the rules of their contest
as well as the general rules of the state fair.

NC Substitute W-9 forms are required in order to receive prize money.
The form here is fillable but you will need to print it, sign it and bring it
with you to the fair.

Contestants also need to sign one of the participation waivers.
Bring it with you when you come to the fair.

**VOLUNTEER AND PARTICIPANT WAIVER OF LIABILITY AND
PHOTOGRAPH RELEASE AGREEMENT (FOR MINORS)**

1. I, the undersigned, have voluntarily elected to participate in the Apprenticeship Contests sponsored by the N.C. Community College System – ApprenticeshipNC (“ApprenticeshipNC”).
2. I understand and recognize the potential for injury to myself, to my personal property and to others and their property, which may result from participating in any manner in the ApprenticeshipNC Contests. I understand, comprehend and appreciate the foreseeable, unforeseeable and inherent dangers and risks of harm involved in the ApprenticeshipNC Contests, and I understand and comprehend that I agree to assume all such risks and dangers during my participation. Furthermore, I agree to use safe practices and tools when engaging in any activities associated with the ApprenticeshipNC Contests.
3. I HEREBY RELEASE, DISCHARGE AND HOLD HARMLESS ApprenticeshipNC, its principals, officers, agents and employees from and against any and all claims, liability and/or causes of actions for death, wrongful death, personal injury (whether physical, emotional and/or psychiatric or any combination thereof), loss of consortium, property damage and/or breach of contract made by or on behalf of the undersigned, the undersigned's spouse, children and heirs, occasioned by, arising out of or incidental to my participation in the ApprenticeshipNC Contests, WHETHER OR NOT RESULTING FROM OR CAUSED BY NEGLIGENCE by, of and/or on the part of ApprenticeshipNC, its principles, officers, agents and employees.
4. I hereby grant to ApprenticeshipNC the absolute and irrevocable right and unrestricted permission concerning any photographs that they have taken or may take of me or in which I may be included with others, to use, reuse, publish, and republish the photographs in whole or in part, individually or in connection with other material, in any and all media now or hereafter known, including the internet, and for any purpose whatsoever, specifically including illustration, promotion, art, editorial, advertising, and trade, without restriction as to alteration; and to use my name in connection with any use if they so choose. I further understand that I am not entitled to any payment for such use.
5. I hereby release and discharge the ApprenticeshipNC, its principals, officers, agents and employees from and against any and all claims and demands that may arise out of or in connection with the use of the photographs, including without limitation any and all claims for libel or violation of any right of publicity or privacy.
6. I HAVE READ AND VOLUNTARILY SIGN THE VOLUNTEER AND PARTICIPANT WAIVER OF LIABILITY AND PHOTOGRAPH RELEASE AGREEMENT, and further agree that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

Signature

_____/_____/_____
Month Day Year

Name (Print)

Parent / Guardian

_____/_____/_____
Month Day Year

Name (Print)

Instructor

_____/_____/_____
Month Day Year

Name (Print)

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4. I hereby grant to the ApprenticeshipNC the absolute and irrevocable right and unrestricted permission concerning any photographs that they have taken or may take of me or in which I may be included with others, to use, reuse, publish, and republish the photographs in whole or in part, individually or in connection with other material, in any and all media now or hereafter known, including the internet, and for any purpose whatsoever, specifically including illustration, promotion, art, editorial, advertising, and trade, without restriction as to alteration; and to use my name in connection with any use if they so choose. I further understand that I am not entitled to any payment for such use.
5. I hereby release and discharge ApprenticeshipNC, its principals, officers, agents and employees from and against any and all claims and demands that may arise out of or in connection with the use of the photographs, including without limitation any and all claims for libel or violation of any right of publicity or privacy.
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Signature

_____/_____/_____
Month Day Year

Name (Print)

NC SUBSTITUTE W-9 FORM GUIDE

*** All sections marked with a red asterisk are required ***

The NC Substitute W-9 Form is required to receive prize money.

Follow the instructions below.

Do not scratch out mistakes or use white-out.

Start over with a clean form if you make mistakes.

Write in BLACK or BLUE ink only.

Use your legal name, address and social security number.

Fillable forms are available on the fair's website ncstatefair.org

You can scan and email your form to: ncsfCompetitions@ncagr.gov

You can mail your form to: NC State Fair - Entry Office

1010 Mail Service Center, Raleigh NC 27699-1010

You can also bring the form with you to the fair.

FILLING OUT THE FORM CORRECTLY

- *1. Check the TOP BOX for Social Security Number (SSN)
- *2. Write your social security number in the blank space
- *4. Write your full legal name the same way it appears on your social security card
- *Address line 1: Write your street number and street name
- *City Write your city *State Write in your state *Zip Code Write in your zip code
- *County Write your COUNTY like "Wake", NOT your country - like USA.
- *8. Contact Name Write your name or your parents name
- *9. Phone Number Write your phone number
- *11. Email Address Write an email address where you can be reached
- *12. Entity Type Check the first box for "Individual"
- *13. Entity Classification Check "Other" at the bottom of the list
write "Contest Winner" in the blank space below it.
- *Printed Name Print your name
- *Printed Title Write "Individual"
- *Authorized US Signature Sign your name
- *Date Write the date you fill out the form

NC Substitute W-9 are required.
You won't get paid if the form is incomplete.
If you make a mistake, start over on a new form.
If you don't want prize money, write "DECLINE"
across the form and turn it in.

NC Office of the State Controller
(IRS Form W-9 will not be accepted in lieu of this form)

**STATE OF NORTH CAROLINA
SUBSTITUTE W-9 FORM
Request for Taxpayer Identification Number**



***Denotes a Required Field**

Section 1 – Taxpayer Identification	<p>*1. <input type="checkbox"/> Social Security Number (SSN), OR <input type="checkbox"/> Employer Identification Number (EIN), OR <input type="checkbox"/> Individual Taxpayer Identification Number (ITIN)</p> <p>*2.</p>		<p>Please select the appropriate Taxpayer Identification Number (EIN, SSN, or ITIN) type and enter your 9-digit ID number. The U.S. Taxpayer Identification Number is being requested per U.S. Tax Law. Failure to provide this information in a timely manner could prevent or delay payment to you or require The State of NC to withhold 24% for backup withholding tax.</p>			
	<p>*4. Legal Name (as registered with the IRS - see instructions):</p>		<p>3. Unique Entity Identifier or Dunn & Bradstreet Universal Numbering System (DUNS) (see instructions):</p>			
	<p>5. Business Name/DBA/Disregarded Entity Name, if different from Legal Name:</p>					
	Contact Information					
	<p>*6. Legal Address</p>		<p>7. Remittance Address (Location specifically used for payment that is different from Legal Address, if applicable)</p>			
	<p>*Address Line 1:</p>		<p>Address Line 1:</p>			
	<p>Address Line 2:</p>		<p>Address Line 2:</p>			
	<p>*City</p>	<p>*State</p>	<p>*Zip (9 digit)</p>	<p>City</p>	<p>State</p>	<p>Zip (9 digit)</p>
	<p>*County</p>		<p>County</p>			
	<p>*8. Contact Name:</p>					
	<p>*9. Phone Number:</p>					
<p>10. Fax Number:</p>						
<p>*11. Email Address:</p>						
<p align="center">*12. Entity Type</p> <p> <input type="checkbox"/> Individual/Sole Proprietor/Single-member LLC <input type="checkbox"/> C-Corporation <input type="checkbox"/> S-Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/Estate <input type="checkbox"/> Other _____ <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) _____ </p> <p>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p>		<p align="center">*13. Entity Classification</p> <p> <input type="checkbox"/> Medical Services <input type="checkbox"/> Legal/Attorney Services <input type="checkbox"/> NC Local Govt <input type="checkbox"/> Federal Govt <input type="checkbox"/> NC State Agency <input type="checkbox"/> Other Govt <input type="checkbox"/> Other (specify) </p>		<p align="center">14. Exemptions (see instructions)</p> <p>Exempt payee code (if any):</p> <hr/> <p>Exemption from FATCA reporting code (if any):</p>		
Section 2 – Certification	<p>Under penalties of perjury, I certify that:</p> <ol style="list-style-type: none"> The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding because of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and I am a U.S. citizen or other U.S. person (defined later in general instructions), and The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. 					
	<p>Certification instructions: Please refer to the IRS Form W-9 located on the IRS Website (https://www.irs.gov/):</p>					
	<p>*Printed Name:</p>		<p>*Printed Title:</p>			
	<p>*Authorized U.S. Signature:</p>				<p>* Date:</p>	

Please complete the [Modification to Existing Supplier Records](#) form if there have been any changes to the following: Tax Identification Number (TIN), Legal Name, Business Name, Remittance Address.

If you would like to receive your payments electronically, please complete the [Supplier Electronic Payment](#) form.

Return all completed forms to the State Agency from which you are requesting payment.

GENERAL FAIR RULES FOR EXHIBITORS

- Exhibitors are encouraged to make all entries early. The right is reserved to reject any entry.
- In most divisions, competition is limited to residents of North Carolina.
- All entries must be made in the name of the owner, breeder, manufacturer, grower, producer or one whose skill the exhibit represents. A firm, to be entitled to exhibit as such, must have been organized not less than 30 days prior to the closing date for entries and such firm must have been organized as a bona fide firm for the purpose of producing or buying and selling the articles or animals it proposes to exhibit in the name of such firm. A firm will be regarded as one exhibitor.
- Official printed forms or copies of forms must be used in making applications for entry. Be sure to fill out the application form completely, accurately and legibly.
- No article or animals will be entitled to exhibition space until proper entry has been made.
- Entry fees are required in some departments.
- Unclaimed exhibits from competitive departments will be considered abandoned if not called for within one week after the official closing of the Fair and may be disposed of as the Manager of the Fair sees fit.
- All exhibits must be officially entered in the Fair on official entry forms provided for that purpose, before the closing date for entries in the department. No article or animal will be entitled to space or considered in the judging until proper entry has been made. Removal of exhibits before the date and time specified will be cause for forfeit of all premiums won, all fees paid and the right to further participation in the Fair.
- All exhibits will be numbered and recorded in the books of the proper department and class and exhibit tag with corresponding numbers will be issued. This tag must be securely attached to the exhibit and must remain on the exhibit throughout the Fair.
- The State Fair assumes no responsibility for the incorrect tagging of exhibits.
- Entries may be shipped via UPS or Fed Ex (signature required) to:
NC State Fair Attn Entry Department 4285 Trinity Road Raleigh NC 27607
- The management will not be responsible for delayed shipments which arrive at the Fair too late to be considered in the judging. All reasonable care will be given to all exhibits; however, exhibits are entered at the exhibitor's risk. The Fair and staff are not responsible for damage or loss at any time.
- Division Directors and Department Superintendents will have full authority over allocation of space.
- If the claim check is lost, such loss should be reported promptly and it will be necessary for the exhibitor to furnish the Department Superintendent or Competitive Exhibits Coordinator proof of ownership of the article on exhibit.
- Exhibits entered in competitions which are not claimed within one week after the close of the Fair will be considered to have been abandoned by the exhibitor and will be disposed of as the Manager of the Fair sees fit.
- The Fair management reserves the right to reject any exhibit which does not reflect merit and which would not be a credit to both the exhibitor and the Fair.
- Division Directors, Department Superintendents, and/or Judges must report disqualification of entries to the Manager of the State Fair immediately after such action is taken. Under no circumstances will judging be considered official and premiums paid in a class where disqualification is recommended until approval of the disqualification(s) is obtained from the fair manager.

- Decision of the judges will be final and no appeal will be considered except in cases of protest in writing, with strong evidence of fraud or violation of the rules of the Fair. Protests must be in writing and filed with the Competitions Coordinator.
- Entries made in wrong classes risk not being judged, and may be moved to the proper class by the Department Supervisor or Competitive Exhibits Coordinator with the permission of the exhibitor.
- Judges will not award premiums or ribbons to any article or animal that does not qualify for one of the classes in the State Fair Premium List.
- The NC State Fair is under no obligation to display every item entered.
- Photographs of exhibits and winners will be taken by official photographers of the NC State Fair. Exhibitors hereby grant the NC State Fair permission to utilize photographs, images, or likenesses in whole or in part for use in official NC State Fair publications and promotions.
- The following colors of ribbons will be used to designate awards:
 - Grand Champion Purple
 - Reserve Champion Lavender
 - First Place Blue
 - Second Place Red
 - Third Place White
 - Fourth Place Pink
 - Fifth Place Yellow
 - Sixth Place Dark Green
 - Seventh Place Light Green
 - Eighth Place Tan
 - Ninth Place Gray
 - Tenth Place and above Light Blue