MID-ATLANTIC SOUTHEASTERN 2026 WINE COMPETITION ENTRY FORM

Competition Dates - August 1-2, 2026

ENTRY FORM AND WINE DUE TO FAIR OFFICE BY JULY 24, 2026

PLEASE FILL OUT COMPLETELY! *(Type or print clearly, use multiple lines if necessary)*

Entry Type: ☐ Commercial Competition ☐ Amateur Competition

Winery Name: _____

Winery Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person's Name: _____

Daytime Phone (8 AM-5 PM): _____ Cell Phone: _____

Email Address: _____ ☐ Yes ☐ No

FOR FAIR USE ONLY

Exhibitor #: _____

Postmark Date: _____

Date Paid: _____

Deposit #: _____

Mail entries with check or money order to:

City of Winston-Salem
(Carolina Classic Fair)
421 W. 27th Street
Winston-Salem, NC 27105

DO NOT FAX!

Section # 101 or 102	Item # 1-79	Description in CCF Catalog	Name of Wine (Use Exact Wording On Wine Label)	Vintage Date *(If Applicable)*	Each Grape/Fruit Variety(s) and %	Is wine made from at least 75% fruit grown Mid-Atlantic SE Region? * Yes or NO	~~COMMERCIAL ONLY~~ Residual Sugar %	~~COMMERCIAL ONLY~~ Alcohol Content %

* Use mutiple lines if necessary for each wine.

* Mid-Atlantic South Eastern Region - GA, NC, SC, TN, VA, and WV

By signing this form, **winemaker** certifies all information is correct and true. _____ Date _____

ALL DISPLAY WINE MUST BE PICKED UP AT THE FAIR OFFICE BETWEEN OCTOBER 12-13, 2026. ANY WINE THAT IS NOT PICKED UP WILL BECOME PROPERTY OF THE CAROLINA CLASSIC FAIR AND BE DISPOSED OF.

Number of Commercial Wines Entered: _____ **x $15.00**

Number of Amateur Wines Entered: _____ **x $5.00**

Total Enclosed: _____

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ENTRY FORM MAY BE COPIED IF NEEDED.

PLEASE FILL OUT COMPLETELY! *(Type or print clearly, use multiple lines if necessary)*

Entry Type: ☐ Commercial Competition ☐ Amateur Competition

Winery Name: _____

Winery Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person's Name: _____

Daytime Phone (8 AM-5 PM): _____ Cell Phone: _____

Email Address: _____

(Circle one)

Interested in sampling and selling your wines one night during our nightly wine tastings at the fair? Yes No

Mid-Atlantic Southeastern Region - GA, NC, SC, TN, VA, WV

FOR FAIR USE ONLY

Exhibitor #: _____

Postmark Date: _____

Date Paid: _____

Deposit #: _____

Mail entries with check or money order to:

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(Carolina Classic Fair)
421 W. 27th Street
Winston-Salem, NC 27105

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Section # ***(101/102)***	**Item #** ***(1-79)***	**Description in CCF Catalog**	**Wine Name** *(Use EXACT wording from label)*	**Vintage Date** *(If applicable)*	**Grape/Fruit Variety and %**	**COMMERCIAL ONLY Residual Sugar %**	**COMMERCIAL ONLY Alcohol Content %**

By signing this form, winemaker certifies wine is made from at least 75% fruit grown in the Mid-Atlantic SE region and all other information is correct:

Signature: _____ Date: _____

# of Commercial Wines Entered: _____ x $15 = _____

# of Amateur Wines Entered: _____ x $5 = _____

Total Enclosed: _____

All display wine must be picked up at the CCF Office between October 12-13, 2026. Any wine that is not picked up will become CCF property and be disposed of.

Section # (*101/102*)	**Item #** (*1-79*)	**Description in CCF Catalog**	**Wine Name** *(Use EXACT wording from label)*	**Vintage Date** *(If applicable)*	**Grape/Fruit Variety and %**	**COMMERCIAL ONLY** **Residual Sugar %**	**COMMERCIAL ONLY** **Alcohol Content %**