

Florida State Taxidermist Association, Inc
Annual Convention and Competition
February 4th, 5th, & 6th 2027
Best Western Gateway Grand
4200 NW 97th Blvd.
Gainesville, Fl. 32606

Date _____

Convention Number _____

Name: _____ Email: _____
 Business Name: _____ Phone: _____
 Address: _____ City: _____ State: _____ Zip: _____

Name of Family Attending: _____

Day of Show
Add on / changes

Membership Dues: *Membership is good from Jan. 1st – Dec. 31st of each year*

New Member _____ Single \$50.00 _____ Family \$75.00 _____ Pioneer/Lifetime _____ Total _____

Registration Information: **Preregister by Jan. 25th to Save Money**

Preregistration Convention fee \$95.00 _____ Day of Show Convention fee \$145.00 _____ Total _____

Banquet Tickets \$35.00 per Adult: # of _____ \$20.00 per Child: # of _____ Total _____

Competition Entries

Number of Entries - Division/Award	Species	Total
Amateur (A)	(each)	\$25.00
Commercial (C)	(each)	\$25.00
Professional (P)	(each)	\$25.00
Masters (M)	(each)	\$35.00
Habitat (H)	(each)	\$25.00
Avant-Garde (AG) (P Only)	(each)	\$0.00
Best All Around (BAA) (P & M only)	(total 4)	\$50.00
Challenge of the Arts (COA)	(each)	\$25.00
Collective Artist (CA)	(P/P)	\$40.00
European Mount (EM)	(each)	\$40.00
Father George (FG) (Fl. Residents Only)	(each)	\$50.00
Martha Maxwell (MM) (Fl. Residents Only)	(each)	\$30.00
Original Wildlife Art (OWA)	(each)	\$40.00
Presidents Challenge (PC)	(each)	\$75.00
(Birds showing Movement) (Cash prize ½ collected + \$250)		
Wildlife Sculpture (WS)	(each)	\$40.00
Mount off (Cash prize ½ of all money collected)		\$50.00
Number of Children that will be attending the children's seminar _____		
		Total due: _____

Please fill out 2nd page with information about your mount/mounts

**I agree all mounts entered have been completed by me or my studio and failure to comply with FSTA competition rules will result in my disqualification for ribbon points. * it is the responsibility of the competitor to read the completion rules and award criteria requirements. No refunds will be given.*

Signature: _____ Date: _____

Payments can be made in Cash, Check or Card. Make checks payable to FSTA. Credit cards will be charged a Square fee of \$1 per \$25

Michele Blankenship
 728 N.E. 36th St
 Ocala, Fl. 34479
 352-427-7638

For Office use only

Notes

PPR on Phone _____ PPR by mail _____ PPR at show _____ R at show _____

Paid Cash _____ Check _____ # _____ CC _____ + Fee _____ Amount Pd _____

Please enter one mount per box and check all that applies. Changes can be made at the show.

Species: _____ Division: Y ____ A ____ C ____ P ____ M ____

Category of Competition

Hog _____ Whitetail Open Mouth _____ Whitetail Closed Mouth _____ Gamehead _____

Reptiles, Amphibians, or Crustation _____ Waterfowl _____ Upland Birds/Turkeys _____

Mammals / Life Size _____ Fish Skin Mount _____ Fish Reproduction _____

____ Used Polytranspar on Fish

____ Used Second 2 Nature form. Invoice # _____ Manikin # _____ P & M only

____ This IS a Florida Deer

____ Used PRO-1 Glue P & M only

This is a Table Mount _____ This is a Wall Mount _____ This is a Pedestal/Floor Mount _____

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