RECIPE SUBMISSION FORM
Menominee Mecem
Cookbook Project

Name: _____

Preferred Contact:

Email: _____ Phone: _____

Recipe Information

Name of Dish: _____

Is this recipe:
☐ Traditional ☐ Family Favorite ☐ Seasonal ☐ Other: _____

Ingredients:
(Please include amounts if known; exact measurements are not required. **Use back side if needed**)

_____

_____

_____

Instructions / How It Is Made:
(You may write step-by-step or in your own words. **Use back side if needed**)

_____

_____

_____

Story or Memory (Optional but Encouraged)	**Additional Sharing (Optional)**
Who taught you this recipe?	I am willing to participate in a cooking demonstration YES ☐ NO ☐
When was it usually made?	I am comfortable with my name being printed in the cookbook YES ☐ NO ☐
What does this dish mean to you or your family?	I am comfortable with photos or recordings (with prior notice) YES ☐ NO ☐

Signature: _____ **Date:** _____

Thank you for sharing your knowledge, your memories, and your time. Your contribution helps keep our traditions strong for future generations.

Please return form to CMN Department of Continuing Education
Or contact: Annette Tourtillott at 715.799.6226 ext. 3097 to pickup

Ingredients (Continued):
(Please include amounts if known; exact measurements are not required.)

Instructions / How It Is Made (Continued):
(You may write step-by-step or in your own words.)

