

# Tag's Amateur BBQ Cook-off Entry Form

## Competitor Application

Team Name \_\_\_\_\_ Contact \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please circle categories in which you will compete:

Chicken\*

Pork Ribs\*

Open Grill\*

\* Teams must enter to qualify for Grand Champion and Reserve Grand Champion

Set up is from 6:00 AM to 9:00am on Saturday, May 29<sup>th</sup>. Fires may be lit upon check in. Cooks meeting at 9:30 then you may begin cooking. The competition judging begins at 3:00 PM Saturday, May 29<sup>th</sup>. Awards will be presented at 5:00 PM on Saturday. This is an amateur event with posted rules applicable. Site must be torn down and free of litter before leaving the premises on Saturday, May 29<sup>th</sup>.

**Waiver of Liability:** In consideration of you accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against and individual or group responsible for the organization or management of this BBQ Cook-Off. I hereby grant permission for BBQ Committee and/or agents authorized by them, to use any photographs, videotapes, motion pictures, recordings and any other record of this event for any legitimate purpose. I agree to abide by the rules and regulations of this event.

Signature of Chief Cook \_\_\_\_\_ Date \_\_\_\_\_

**Release must be signed or entry will not be processed**

Return to: Caryl Sutterby - Fax – 562-3412

Or mail to: Tag's - PO Box 15 - Big Flats NY 14814