

BBQ in the Badlands: Contestant Application

KCBS Master Series Contestant Application



Head Cook Name:

Head Cook Member number:

Team Name:

Categories: mark with x Chicken ____ Pork Ribs ____ Pork ____ Beef Brisket ____

To qualify for Grand Championship you will need to participate in all 4 categories.

Phone:

Alt Phone:

Address:

City, State Zip:

Email:

Number of Assistant cooks:

A \$50 non-refundable deposit for the event is required the entry fee is a total of \$250 check method of payment:

Please bill me via email
(You can pay online)

Will mail Check
(Send checks to address below)

Glendive Chamber of Commerce & Agriculture | 808 N Merrill Ave | Glendive, MT 59330

Events@glendivechamber.com visit www.glendivechamber.com

Waiver of Liability

GLEN DIVE CHAMBER OF COMMERCE & AGRICULTURE, KCBS, including its officers, sponsors and/or associates and the contestants, including parents, and/or legal representatives, agree that the GLEN DIVE CHAMBER, KCBS, will in no case be responsible for any loss, damage, or injury regardless of how much loss, damage, or injury is occasioned, and indemnify and save harmless The GLEN DIVE CHAMBER, KCBS from any and all claims, suits, and/or judgements including the cost for defense of and such claim and/or suit by the GLEN DIVE CHAMBER, KCBS brought by anyone as a result of any loss, damage, or injury to any person or property, occasioned by any action or inaction of contestant, either solely or in conjunction with the GLEN DIVE CHAMBER or KCBS. Further, I hereby grant full permission to the GLEN DIVE CHAMBER, KCBS and/or agents authorized by them, to use any photographs, videotapes, motion pictures, recordings or any other record of the event for any legitimate purpose. I have read and agree to abide by the rules governing the BBQ cook-off.

Signature: _____