

38th Annual South County Hot Air Balloon Festival

and

5th Annual Campus Cook-Off

KCBS Sanctioned RI State BBQ Championships

July 22-24, 2016

OFFICIAL BBQ COMPETITORS REGISTRATION FORM

Team Name: _____ KCBS Membership # _____

Chief Cook: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Number of members on team: (4 team members are allowed free admission to the festival with wristbands) _____

Do you anticipate competing in the potential Grilling Contest on Saturday the 23rd? Yes No Perhaps

Entry Fee: Early Registration \$250: (\$50 non-refundable deposit 1 Jan to 31 Mar Deadline to hold a team's spot...\$200 balance by 1 June 2016)

Regular Registration \$300 in full..... 31 Mar to 15 July Deadline

T-shirt size (Circle one): S M L XL 2XL

*Entry Fee includes 20 x 40 space plus limited electricity and water. Must provide own 100-ft. hose and Y connector for water. **Please specify electrical requirements here:** _____*

Contact Information:

Bud Faria

Phone: 401-789-3902

Email: budfaria@yahoo.com

Payment in full must be included with this form.

Mail this form and make checks payable to:

ROTARY CLUB OF WAKEFIELD

PO BOX 382

WAKEFIELD, RI 02879

Visit us on the Web:

www.southcountyballoonfest.com

LIBAILITY WAIVER: I agree, The Rotary Club of Wakefield, RI (Herein after known as event sponsor), and The University of Rhode Island (Herein known as event host), including its members, officers, sponsors, and/or associates and the contestants, including parents, and or legal representatives, agree that the event sponsor, and event host, will in no case be responsible for any loss, damage or entrant's injury regardless of how much loss, damage, or injury is occasioned, and I agree to indemnify and hold harmless the event sponsor and event host from any and all claims, suits or judgments including the cost of defense of any claim arising from such action against the event sponsor event host. Furthermore, I hereby grant full permission to the event sponsor and event host, and/or their agents to use any photographs, videotape, or any other record of this event for legitimate purposes.

I agree to the above terms of the Waiver of Liability and agree to abide by all NEBS and KCBS rules governing the South County Hot Air Balloon Festival Campus Cook-Off and RI state BBQ Contest presented by the event sponsor.

Signature: _____ Date: _____