

Official Competitors Application
Boo B Que
Indian River Delaware Seashore State Park
39415 Inlet Road
Rehoboth Beach, Delaware 19971
October 20 & 21, 2017

Team Name: _____
Chief Cook: _____ Phone: _____
Email: _____ KCBS# (if applicable) _____
Address: _____
City: _____ State: _____ Zip: _____

Entry Fee: \$300.00 for Camping Site includes 3 nights camping \$ _____

15 and 30 Amp electric outlet is included, unit spaces will be allotted one outlet only. Electrical cords will NOT be provided, please bring enough for your personal use. If additional amps are needed please contact Sandy Fulton at 410-726-1881. Please bring hose for water hook up.

TOTAL ENCLOSED: \$ _____

Check categories in which you will compete:

_____ Beef Brisket* _____ Pork Ribs* _____ Chicken* _____ Pork*

Do you wish to participate in Best Wings Contest Friday Night: ____Yes ____No

All competitors who are participating in the wing competition will have reserved spots in front of judges tent. This will ensure that the people who are tasting the wings will have only to go up and down the same rows.

*Only these categories will be eligible for Grand Champion and Reserve Grand Champion Awards.

Set-up may begin at 12 PM on Thursday, October 19, 2017: Judging begins on Saturday, October 21, 2017 at 12:00 Noon.

Awards will be presented on Saturday afternoon, October 21st at 5:00pm. This is a KCBS sanctioned event with all KCBS rules applicable. Additional rules may be available at sign up. Site must be torn down and free of litter by 11:00pm Saturday night. All food vendors must show proof of liability insurance naming KCBS as the additional insured.

Waver of Liability: In consideration of your accepting this entry, I understand, intending to be legally bound, hereby myself, my heirs, executors and administrators, waive and release any and all rights and claims for damage I may have against Indian River Delaware Seashore State Park and KCBS. I hereby grant permission to the Boo B-Que committee and/or agents authorized by them to use photographs, videotapes, motion pictures, recordings and any other record of this event for any legitimate purpose.

Signature of Chief Cook: _____ Date: _____

Release must be signed or entry will not be processed

Indicate how awards checks should be made out to your company: _____

Make checks payable to: **Boo B Que**

Return payment and form to **Boo B Que, 22536 Sussex Highway, Seaford, Delaware 19973.**

I will have an RV in my booth: Yes _____ No _____ Additional Space will be needed: Yes _____ No _____ (See cost above)

Payment Method: _____ Check enclosed: _____ Credit Card (MC and Visa only)

Card # _____ Expiration Date: _____ CCV#: _____

Signature: _____ Printed Signature: _____

Any Questions please contact Sandy Fulton at 410-726-1881 or email: SandyFulton720@gmail.com