



2010 CONTESTANT REGISTRATION

August 6th and 7th, 2010

Dillon, Colorado



Space fee includes one 20' x 20' space (or a 20' x 15' space) and 4 KCBS* categories

You may DOWNLOAD this application and FAX to 208-247-2801 with your credit card number
or mail with check to the address below.

Space is limited to 75 teams so let us hear from your soon!

Select Categories

Cost

<input type="checkbox"/>	RIBS* CHICKEN* PORK* (Boston Butt, Picnic, Whole Shoulder) BRISKET*	\$195 (includes 4 *categories & 1 space)	
<input type="checkbox"/>	MISCELLANEOUS*** (All ingredients prepared on site)	\$ 40 x ____ number of entries	
<input type="checkbox"/>	SAUCE** (Must be brought to site)	\$ 20 x ____ number of entries	
<input type="checkbox"/>	SALSA** (Must be brought to site)	\$ 20 x ____ number of entries	
<input type="checkbox"/>	DESSERT*** (All ingredients prepared on site)	\$ 30 x ____ number of entries	
<input type="checkbox"/>	SIDE DISH*** (All ingredients prepared on site)	\$ 30 x ____ number of entries	
<input type="checkbox"/>	KID'S Q Age 10 & under	\$ 15 x ____ number of entries	
<input type="checkbox"/>	KID'S Q Age 11 to 15	\$ 15 x ____ number of entries	
<input type="checkbox"/>	EXTRA 20' X 20' SPACE	\$ 60 x ____ number of spaces	
<input type="checkbox"/>	EXTRA 10' X 20' SPACE	\$ 40 x ____ number of spaces	
<input type="checkbox"/>	ELECTRICITY (One standard 20-amp hookup. Additional power needs may be accommodated and might affect charges and space location.)	\$ 40 x ____ number of spaces	
	EARLY BIRD DISCOUNT 20% OFF!	(Must be submitted by 5/15/2010)	
<div style="border: 1px solid black; padding: 5px;"> <p>NOTE: Please fill out separate Kid's Q form on page 2 for each child or team and submit with application.</p> </div>			
			TOTAL REGISTRATION =

- * These 4 categories are required for both Grand Champion & Reserve Grand Champion.
- ** Does not include on-site preparation, does not include site.
- *** Must be prepared entirely on site but KCBS rules do not apply to presentation.

For credit card payment:

Credit Card Number _____

Expiration Date _____

Security Code Number _____

Name on Card _____

Please make check payable to:

Rotary Foundation of Summit County

PO Box 1195

Frisco, CO 80443

If your plans change and you need to cancel your reservation prior to July 1st, you can receive a full refund. After July 1st refunds will be handled on a case-by-case basis. A late registration fee of \$50.00 will apply after July 15th.

Contestants may participate in **BBQ BUCK®** ticket sales. All vendors will receive 80% of proceeds from their sales. The remaining 20% will be donated to The Rotary Foundation of Summit County, a 501(c)(3) non-profit, in the vendors name and an acknowledgement of the vendor's donation will be provided. All sales will be subject to Town of Dillon and Colorado Sales Tax and this amount (approx. 8.275%) will be deducted from the gross proceeds. This year vendors will have an opportunity to sell from 12 noon on Friday until 9:00pm. Saturday sales will begin at 10:00am and vendors may elect to sell until either 2:00pm or 7:00pm (just prior to the concert at the Dillon Amphitheatre).

- No, I will NOT sell my BBQ to the public.**
- Yes, I will sell my BBQ to the public until 2:00pm Saturday.**
- Yes, I will sell my BBQ until 7:00pm Saturday.**

Team Name _____
 Chief Cook _____
 Mailing Address _____

 E-mail Address _____
 Telephone Number _____

Kids Q – Registration

Child's Name _____

Birthdate _____

Team _____

Responsible Adult _____

I agree to abide by all of the KCBS Rules and Regulations and to have lots of fun!

*Yes, I would like to have a team biography included on the BBQ at the Summit website.
 (This is absolutely optional but it could be fun! Look at some of the one posted.)
 Please include Bio and picture via email!*

REQUIRED RELEASE (Must be signed!!)

Waiver of Liability: In consideration of the Rotary Foundation of Summit County and The Town of Dillon 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 against the Town of Dillon, The Rotary Foundation of Summit County, and The BBQ at the Summit, their representatives, successors and assigns for any and all injuries suffered by me or any member of my Team during the course of this event. Further, I hereby grant full permission to The BBQ at the Summit and/or agents authorized by them, to use any images, recordings and any other record of this event for any legitimate purpose.

I agree to abide by the rules and regulations of The Kansas City Barbeque Society and The BBQ at the Summit.

 Signature of Chief Cook

 Date

 Parent or Guardian (if Under age 18)

 Date

Upon receipt of your completed application you will receive a confirmation of your entry with your team number. Space(s) will be assigned based on your registration number, doing our best to accommodate your needs. Site plan is subject to change.

