



PARTICIPANT ENTRY FORM
\$25 per Chili Entry

Team Name: _____

Please check the categories you are entering (\$25 fee per entry.):

- Texas Red Green/White Freestyle Beans

Preferred table location – see next page. Tables are assigned on first come-first served basis and all locations are subject to change the day of the event. If you are cooking 1-2 entries you will be assigned 1 table. If you are cooking 3-4 entries you will be assigned 2 tables.

Cook Names (Use as many lines as needed):

Primary Chef Name: _____

Primary Chef Phone: _____

Primary Chef Email: _____

Other Chefs: _____

Entry fee will be collected day of the event – CASH or CHECK ONLY. This completed form and **Health Department Certificate** should be returned via email to reeslangspi@gmail.com.

All entries must be returned no later than **noon Wednesday Feb 16, 2019**. Due to City Health Department regulations, late entries cannot be accepted.

Bay

