

BBQ CONTEST ENTRY FORM

OFFICIAL TEAM NAME: _____

CHIEF COOK: _____

ADDRESS: _____

A CHECK OR MONEY ORDER FOR \$10 MUST BE RECEIVED WITH EACH ENTRY FORM MADE OUT TO THE CALIFORNIA EAGLES 4027

RELEASE AND INDEMNITY AGREEMENT

IN CONSIDERATION OF THE GRANTING OF THE RIGHT TO PARTICIPATE, ENTRANTS, PARTICIPANTS, AND SPECTATORS, BY EXECUTION OF THIS FORM, RELEASE THE OZARK HAM & TURKEY FESTIVAL AND THEIR OFFICERS, REPRESENTATIVES, WORKERS, PROPERTY OWNERS, OCCUPIERS, OR SPONSORS CONNECTED WITH THE PRESENTATION OF THE OZARK HAM & TURKEY FESTIVAL OF AND FROM ANY CLAIMS, INJURIES, LOSSES, DAMAGES, OR JUDGEMENTS THAT MAY BE SUFFERED BY THE ENTRANT, INDEMNIFY THE AFORESAID PARTIES AGAINST ANY LOSS, LIABILITY, EXPENSE, OR PAYMENT RESULTING FROM ANY SUCH.

CHIEF COOK/CONTESTANT SIGNATURE: _____

DATE: _____

SEND OFFICIAL ENTRY FORM TO:

CALIFORNIA EAGLES 4027
BBQ CONTEST
314 N HIGH ST
CALIFORNIA MO 65018

PHONE: (573) 796-4027

QUESTIONS?: (573) 680-5074 (JIM HUDSON)