



**PARTICIPANT ENTRY FORM**  
**\$25 per Chili Entry**

Team Name: \_\_\_\_\_

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

Red

Green/White

Freestyle  
(including  
Vegetarian)

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@aol.com](mailto:reeslangspi@aol.com).

All entries must be returned no later than **noon Wednesday Feb 8, 2017**. Late entries will not be accepted due to Health Department regulations.

Bay

