



KCBS TEAM ENTRY FORM

TO WIN GRAND CHAMPION AND RESERVE GRAND CHAMPION, YOU MUST COMPETE IN ALL 4 MAIN CATEGORIES

Team Name _____ KCBS# _____

Head Cook _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Cell Number _____

Email _____

Team Packets will be sent via email only, please provide an email address.

Entry Fee: \$225 before August 1 _____ \$250 after August 1 _____ (Max. 30 teams)

Saturday, Sept. 19 – Chicken- Noon, Pork Ribs -12:30pm, Pork – 1pm, Brisket – 1:30pm

KCBS Format and Rules Apply.

Entry includes: One BBQ Team site, one 10 lb. bag of ice, one free shirt. Full service sites may be limited this year. We will make an effort to accommodate you!

Camper Type/Size _____ Electricity Required Yes _____ No _____

Setup Dimensions _____

I will check in: Thursday Evening _____ Friday Morning _____

Free Shirt Size _____ \$10 each Shirts Sizes _____

People’s Choice (public tasting) I will give samples to the public. Cash Prizes for both days.

Friday 5PM Yes _____ No _____ Anything Beef (while supplies last)

Saturday 2-4PM Yes _____ No _____ Chef’s Choice (while supplies last)

I will participate in the **100KCBS Meals Mission** Yes _____ No _____ (meat delivered to your site)

Are you competing in the **Rushmore Cup Series** _____ and/or **RMBBQA Cup Series** _____

Please Make Checks Payable and Mail to: Spearfish Rec Center 625 N. 5th St. Spearfish, SD 57783

Contact: Chris Harwood - Community Activities Coordinator – City of Spearfish

(605)722-1430 office (605) 645-9568 cell toabbq@gmail.com

<http://www.tasteofautumnbq.com>

Event is held at the Spearfish City Campground 404 S. Canyon St Spearfish SD 57783

TEAM AGREEMENT

AS A CONDITION OF PARTICIPATION IN THE TASTE OF AUTUMN BBQ CHAMPIONSHIPS

Please read the agreement below in full, sign and send back to Spearfish Rec Center/City of Spearfish.

1. This event is based on a first come basis. However Spearfish Rec Center/City of Spearfish reserves the final right of refusal to any and all teams. There will be No Cash Refunds.
2. There is no "Rain Delay" schedule for this event, and if required the event may be canceled in whole or in part by Spearfish Rec Center/City of Spearfish without prior notice.
3. I agree to follow all guidelines of the South Dakota Health Department for food service as included in the Guidelines, including setting up and use of hand-wash stations. **No Pets will be permitted in the Food Booths or Cooking Areas.**
4. No Alcoholic beverages will be Sold or Distributed by anyone other than vendors appointed by Spearfish Rec Center/City of Spearfish. No flammable items or hazardous materials. Weapons, controlled substances or similar materials will not be permitted on the premises.
5. Teams shall continually police their area for safe and sanitary conditions. At the conclusion of the event, each team shall be responsible for his/her own trash removal. They will remove their own trash from within the booth, and dump only in the dumpsters designated as an event dumpster and shall restore the area to an acceptable condition as when you arrived.
6. **HOLD HARMLESS:** In recognition that there may be some risk, injury or property damage in such an undertaking at the Taste of Autumn BBQ Championships, the undersigned team cook and team releases and hold harmless Spearfish Rec Center/City of Spearfish, and all of its members/officers, for any and all liability for injury or damages to any team members, or which may result from his/her participation, or which may occur to third parties by the act(s) of the members, his/her employees or agents. No action will be asserted or maintained against Spearfish Rec Center/City of Spearfish and any or all of its members/officers and or sponsors including but not limited to Spearfish Rec Center/City of Spearfish as a result of any occurrence in any way with the Taste of Autumn BBQ Championships. Further the team members shall defend any action so asserted or maintained arising out of any action taken by the team members. Further, I hereby grant full permission to the Taste of Autumn BBQ Championships organizers and/or agents authorized by them and to each of the entities and individuals listed above, to use any photographs, videotapes, recordings, or any other record of the event for any legitimate purpose. In addition, I agree to abide by all the rules of Taste of Autumn BBQ Championships and the Kansas City Barbecue Society and hereby assume full legal liability and responsibility for the behavior of myself and any of my guests.
7. **LIABILITY:** As between the parties, each party shall be solely responsible for any and all liability arising from Personal Injury, including death, or damage to property arising from the act or failure to act of the Respective Party or of its Officials, Agents and Employees pursuant to this agreement.

I have read, understand and agree to all of the above.

Signed by Head Cook:

Team Name:

Printed Name:

Date: