LELAND, MISSISSIPPI • OCTOBER 22, 2016

kids fun run • chili cookoff • children's art • southern music

Frogfest Chili Cook-Off

Official Team Entry Form

Team Name:_____

Team Captain	Contact Information:
Phone (include area code):	
Email:	
Address:	
City/State/Zip:	
Please provide a number at which we can reach	you on the day of the festival:
Special Needs: □ Electrical connection. Number of out □ Space configuration (if deviating from	
Anticipated Arrival Time:	Requested Cooking Start Time:
s the official representative of the aforementioned team, I affirm a acluding the Team Conduct section, and hereby agree to abide by su	that I have read the Deer Creek Chili Cook-Off Official Rules and Regulations ch rules and regulations.
eland, Leland Chamber of Commerce, and each of their agents, serva esult from my participation in the event. I further agree to save and l ability for any loss, cost, injury, or damage to persons or property whi tate that I am in proper physical condition to participate in this even	all claims for myself and my heirs against the Frogfest Chili Cook-Off, the City onts, officers, and employees, for injury or illness which may directly or indirectly hold said parties harmless and agree to indemnify each said person against an ich may arise by virtue of the undersigned engaging in the competition. I further, the Cook-Off organizers reserve the right to postpone, cancel, or modify the throl that might affect the health or safety of the participants. All "Prizes" are
Signed:	Date:

Make all checks payable to the Leland Chamber of Commerce. Mail completed entry form with \$50 entry fee to Leland Chamber of Commerce, P.O. Box 67, Leland, MS 38756.