



OFFICIAL ENTRY FORM
SEPTEMBER 4 - 5, 2009

OFFICIAL TEAM NAME _____

CHIEF COOK _____ NUMBER OF ASSISTANTS (LIMIT 5) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____ FED ID # OR SOCIAL SECURITY # _____

DAY PHONE _____ EVENING PHONE _____ CELL PHONE _____

KCBS MEMBER [] YES [] NO MEMBER NAME _____ KCBS NUMBER _____

COMPETITION CATEGORIES (ALL 4 REQUIRED TO QUALIFY FOR GRAND CHAMPION): ENTRY FEE

[] CHICKEN [] RIBS [] PORK [] BRISKET \$ 250.00

OPTIONAL CATERGORIES:

[] ANYTHING BUTT

[] SAUCE

[] DESSERT



ADDITIONAL CHARGE FOR CAMPERS \$50.00 _____

TOTAL AMOUNT ENCLOSED WITH ENTRY FORM \$ _____

Checks for the total entry fee must be received with each application, and checks should be made payable to OMAR SMOKE ON THE BEACH. The final deadline for entry is August 15, 2009. Smoke on the Beach reserves the right to reject any application. If your application is not accepted, your money will be refunded. However, no refunds will be made after you have been accepted into the contest. For additional information, please contact Dennis Weaver at (803) 493-2637 or Kenny Craven at (843) 296-5500. Further information, forms, rules, and more are located at www.smokeonthebeach.com.

Complete this form and mail, along with the entry fee, to:

OMAR SMOKE ON THE BEACH
176 PATRIOTS POINT ROAD
MT. PLEASANT, SC 29464

NOTICE: NO GOLF CARTS ALLOWED (EVEN ON A TRAILER) PER MYRTLE BEACH POLICE DEPARTMENT.

WAIVER OF LIABILITY: I, the undersigned on behalf of myself and my team, intending to be legally bound, hereby, for myself, my heirs, my team, executors and administrators, waive and release any and all rights and claims for damages I or my team may have against Smoke on the Beach, Omar Shrine Center, Beach Boogie & BBQ Festival, Sun Fun Festival, the City of Myrtle Beach, the Myrtle Beach Area Chamber of Commerce, the Festival sponsors, representatives, employees, agents, volunteers, successors, and assigns for any and all injuries suffered by myself, my team, or my guests in the event. Further, I grant full permission to the event to use any photographs, video, or any other recording of the event for any legitimate purpose. I agree to abide by the rules and regulations of KCBS and the Smoke on the Beach / BeachBoggle & BBQ Festival event.

CHIEF COOK'S SIGNATURE (Required) _____ DATE _____



PAYMENTS ARE NOT DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS.
NET PROCEEDS FROM THIS EVENT ARE FOR THE BENEFIT OF OMAR SHRINE CENTER.

www.smokeonthebeach.com