



COOK-OFF APPLICATION

Mail application and entry fees to:

Smoke and Soul Fest

c/o Brain Injury Alliance of Wyoming / 123 West 1st Street, Suite 400 / Casper, WY 82601

For more information call (307) 473-1767 or jennifer@wybia.org.

We will not accept any application without payment.

Team Name: _____

Pitmaster: _____ KCBS #(if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Four Meat Competition - \$275 registration fee

- Meats include Pork Ribs, Pork (Boston Butt or Shoulder), Brisket, and Chicken.
- Must adhere to KCBS rules. For a list of rules, please visit <http://kcbs.us/about.php>, and click on the "2018 Rules" button in the bottom left.
- You must enter all four categories to be eligible for Grand Champion and Reserve Grand Champion.
- Each site includes One 20 amp electrical hookup. Water will be available onsite but not to each site.
- Early arrival available Thursday, September 13th starting at 12:00 p.m.
- Check here if you are arriving on Thursday
- Please check which site size best fits your rig. Sites will be assigned on a first come, first serve basis upon receiving a completed application and payment.

20'x30' Site

20' x 40' Site

12' x 40' on Street Site

People’s Choice Tasting Competition – help us raise money for The Brain Injury Alliance of Wyoming

- Wow the crowd with your amazing BBQ skills! You give us your BBQ and we will take care of the rest.
- Check here if you are willing to donate your leftover competition meats. Yes
- I will cook _____ additional Pork Butts provided by BIAW to be served in the People’s choice tasting tent.
- Cash Prize awarded to the first place team.
- The Brain Injury Alliance of Wyoming is a 501(c)3 non-profit and a donation receipt will be provided upon request.

BBQ Team Vendor - 80/20 Split on Sales

- Must vend BBQ items to the public from 11:30 AM until 6:30 PM on Saturday.
- We will locate your team in premium location close to the public.
- Maximum of 2 vendors

Payment Type

Make checks payable to: BIAW

- Cash Check # _____
- Credit Card # _____ Exp _____ CVV _____ Zip Code _____

Application Process: This is an application only, it does not guarantee acceptance. You will be notified of your status. We will not process your fees unless you have been accepted. Once accepted, we will deposit your fees, and you will receive an acceptance letter and participant packet with more information. This application is non-transferable and the entry fee is non-refundable.

Waiver of Liability: In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the Brain Injury Alliance of WY, their benefactors, representatives, successors, and/or assigns, for any and all injuries suffered by me in this event. I agree to abide by the KCBS rules, regulations, and judging procedures as well as any and all rules, laws, and guidelines established by the Smoke & Soul Fest. Further, I hereby grant full permission to Smoke & Soul Fest and/or agents authorized by them, to use any photographs, videotapes, motion pictures, recordings, and any other record of this event for any legitimate purpose.

Signature of Pitmaster

Date

Parent/Guardian (if under 18 years of age)

Date