



FRIDAY, SEPTEMBER 13, 2013
NICHOLSON
Carnival Grounds



BBQ COOK OFF TEAM REGISTRATION FORM

Team Name: _____

Chief Cook: _____ **Phone Number:** _____

Email address: _____
(All correspondence will be with Chief Cook)

Address: _____

City: _____ **State:** _____ **Zip:** _____

Assistant Cooks: *(Maximum of 3)*
1. _____
2. _____
3. _____

Select category for entry:

 Pork Ribs  Beef Brisket  Pulled Pork

Designate a United Way to which your People's Choice votes will be contributed:

_____ Wyoming County _____ Broome County _____ Susquehanna County
_____ Wyoming Valley _____ Other (_____)

Space Information: *Each team will be allocated at least one 10'x15' space.*

Payment Information: *A minimum donation of \$150.00 must be received for each category entered no later than Sept. 3, 2013. No refunds will be provided once you have been accepted into the cook-off.*

*Please make checks payable to **Williams United Way**. Return registration form to:
Williams, Attn: Marcellus Barbecue Cook- Off, 51 Warren Street, Tunkhannock, PA 18657.*

I have read and agree to abide by all the attached Rules and Regulations of the Williams United Way BBQ Cook-Off.

Chief Cook Signature: _____

Questions? Please call Deserae Davis at 570.996.4001 or email us at MarcellusBBQCookOff@Williams.com