

**Official Backyard  
Competitors Application  
The Historic New Castle Colonial BBQ  
Competition at Battery Park  
New Castle, Delaware  
June 8 & 9, 2018**

Team Name: \_\_\_\_\_  
Chief Cook: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ KCBS# (if applicable) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Entry Fee: \$100.00 for a 25' X 25' space includes all categories \$ \_\_\_\_\_  
\$10.00 for each additional linear feet (contiguous site) \$ \_\_\_\_\_

*15 and 30 Amp electric outlet is included, unit spaces will be allotted one outlet only. Electrical cords will NOT be provided, please bring enough for your personal use. If additional amps are needed please contact Sandy Fulton at 410-726-1881. Please bring hose for water hook up.*

TOTAL ENCLOSED: \$ \_\_\_\_\_

Check categories in which you will compete:  
\_\_\_\_\_ Chicken\* \_\_\_\_\_ Ribs\*

I will participate in the chicken wing competition on Saturday afternoon: YES \_\_\_\_\_ NO \_\_\_\_\_

Set-up may begin at 7 AM on Friday, June 8, 2018: Judging begins on Saturday, June 9, 2018 at 12:00 Noon. Awards will be presented on Saturday afternoon, June 9, 2018 by 5 P.M. This is a KCBSanctioned event with all KCBS rules applicable. Additional rules may be available at sign up. Site must be torn down and free of litter by 11:00pm Saturday night.

**Waver of Liability:** In consideration of your accepting this entry, I understand, intending to be legally bound, hereby myself, my heirs, executors and administrators, waive and release any and all rights and claims for damage I may have against The Historic New Castle Colonial BBQ Competition at Battery Park and the Kansas City Barbecue Society. I hereby grant permission to the New Castle Colonial BBQ Competition at Battery Park committee and/or agents authorized by them and the Kansas City Barbecue Society to use photographs, videotapes, motion pictures, recordings and any other record of this event for any legitimate purpose.

Signature of Chief Cook: \_\_\_\_\_ Date: \_\_\_\_\_  
Release must be signed or entry will not be processed  
Indicate how awards checks should be made out to your company: \_\_\_\_\_

Make checks payable to: **New Castle Charities**  
Return payment and form to: **Sandy Fulton, 8139 Harmon Landing Road, Snow Hill, Maryland 21863**

I will have an RV in my booth: Yes \_\_\_\_\_ No \_\_\_\_\_ Additional Space will be needed: Yes \_\_\_\_\_ No \_\_\_\_\_ (See cost above)

Payment Method: \_\_\_\_\_ Check enclosed: \_\_\_\_\_ Credit Card (MC and Visa only)  
Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CCV#: \_\_\_\_\_  
Signature: \_\_\_\_\_ Printed Signature: \_\_\_\_\_

Any Questions please contact Sandy Fulton at 410-726-1881 or email: [SandyFulton720@gmail.com](mailto:SandyFulton720@gmail.com)  
[Please print or type in information, must be legible.](#)