



South Dakota BBQ Championships
 SD State Fairgrounds, Huron, South Dakota
 1060 3rd Street SW | (605) 353-7354
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 www.sdbbqchampionships.com

The 14th Annual ORIGINAL SD BBQ CHAMPIONSHIPS ENTRY FORM
June 4 and June 5, 2021

Fill out the application below and return with payment.

Team Name: _____

Contact Name: _____ **KCBS #:** _____

Address: _____

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

Phone: _____ **Email Address:** _____

T-shirt Size: _____

* Each team registered will receive (1) complimentary t-shirt.

Length of Trailer/Camper: _____

*Please provide the total space you'll be taking up. Knowing this information will ease placement.

We are a new team. **Referred by:** _____
 (Person's name) (Team name)

Four Meat Competition –\$225 (*Early Bird discount–\$200 by April 15)

- * Four meats are Pork Ribs, Pork (Boston Butt or Shoulder), Brisket, and Chicken
- * Must adhere to KCBS rules.

One Meat Competition –\$100 (*Early Bird discount–\$75 by April 15)

- * Meat is pork ribs. Contest will be held on Friday, June 4.
- * Must adhere to KCBS rules.
- * Referral promotion does not apply to one meat contest.

People's Choice Backyard BBQ Competition – Free to teams competing in the KCBS contest.

- * Meat is provided to teams. Cash prizes in each meat division and judging category.

Payment Type

Cash _____ Check# _____ Master Card _____ Visa _____ Discover _____

Credit Card #: _____ Exp. Date: _____ CVV: _____

Proceeds to go to the South Dakota State Fair Foundation. **Make checks payable to: "SD BBQ Championships".**

Please mail to: SD State Fair, Attn: Candi Briley, 1060 3rd St. SW, Huron, SD 57350.

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 "SD BBQ Championships", "The South Dakota State Fair" & "Huron Chamber & Visitors Bureau" their benefactors, representatives, successors, and/or assigns, for any and all injuries suffered by me in this event. Further, I hereby grant full permission to "SD BBQ Championships", "SD State Fair" & "Huron Chamber and Visitors Bureau" 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 Chief Cook _____ **Date:** _____

Parent/Guardian _____ **Date:** _____

(If under 18 years of age)

Refer a new team to participate in the BBQ and receive \$50 off entry fee for both teams! Call for more information.

Office use only:

Date Received: _____

Paid: _____

Name on check if applicable: _____

Location Received: _____