

REGISTRATION FORM

GRACE FEST 2017

3rd ANNUAL CHILI COOK-OFF

SATURDAY, OCTOBER 7, 2017 1:00 p.m. – 5:00 p.m.

*CHILI ENTRY DEADLINE: Thursday, October 5, 2017

CONTESTANT’S NAME: _____

CHILI’S NAME: _____

NUMBER OF YEARS IN CONTEST: _____

ADDRESS: _____

CITY: _____ PHONE: _____

EMAIL ADDRESS: _____

\$15.00 ENTRY FEE

PLEASE MAKE CHECKS PAYABLE TO GRACE CHRISTIAN SCHOOLS

I agree to the official rules and regulations.

Contestant’s Signature

Date

OFFICE USE ONLY:

Entry Fee Amount Paid: \$ _____

Check # _____ Cash _____ Credit Card _____