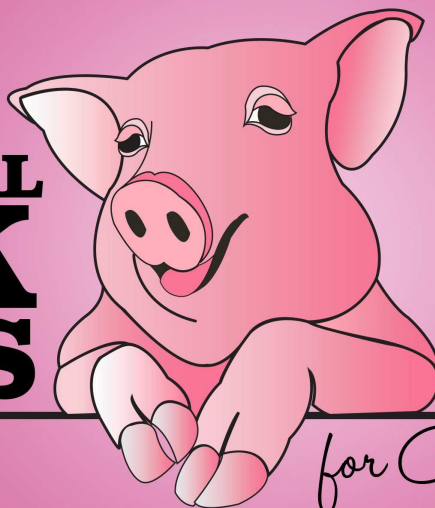


4TH ANNUAL PINK HEALS



BBQ COOK-OFF COMPETITION

for Cancer Awareness

The 4th Annual Pink Heals/Loxley VFD BBQ Cook-Off Competition is an official BCA sanctioned barbeque competition

COMPETITION RULES

Pink Heals/Loxley VFD BBQ Cook-Off Competition adheres to the official BCA Rules and Regulations except as listed on this page. The competition will be held in Loxley Municipal Park.

COMPETITION CATEGORIES

- Pork Spare Ribs(7 ribs)
- Chicken(7 legs)
- Pork Butt(shredded, fill the box)
- People's Choice – Any recipe you choose

NOTE: No pre-marinating meat is permitted, charcoal, wood, or wood pellets, NO GAS.

PRIZES

Grand Champion - \$500 plus trophy
People's Choice - Trophy
1st Chicken - \$300 plus trophy 2nd
Chicken - \$200
3rd Chicken - \$100
1st Ribs - \$300 plus trophy
2nd Ribs - \$200
3rd Ribs - \$100
1st Butt - \$300 plus trophy
2nd Butt - \$200
3rd Butt - \$100

EVENT SCHEDULE

Friday, September 1st

12pm – Team setup
5pm – Mandatory Cooks Meeting

Saturday, September 2nd

9:20 – 9:40 – Ancillary chicken turn-in
10:20 – 10:40 – Pork Spare Ribs
turn-in
11:20 to 11:40 – Pork Butt turn-in
12pm – Gates Open
TBA – Awards
5pm – Event ends

CONTESTANT RESPONSIBILITIES

Each participating contestant shall supply ALL of his/her own meat, cooking ingredients, individual cooking devices, utensils, prep tables, etc. The only thing provided to contestant is a 20' x 20' cooking area for 5 team members and access to electricity

and water (water hoses and extension cords must be provided by contestant). The fee for any additional team members is \$20 each. Contestants must adhere to all electrical and fire codes. All cleanup of the provided space must be completed at the end of the event.

WAIVER OF LIABILITY

In consideration of your accepting this entry, the undersigned, intending to be legally bound, hereby for myself, heirs, executors, and administrators, waive any and all right and claims for damages arising against Pink Heals, Loxley VFD, and the Town of Loxley and assigns for any and all injuries suffered by myself or my team members in the above-described event. Further, I hereby grant full permission to the event organizers to use any photographs, video recordings, or any other record of this event for any reason.

I AGREE TO ABIDE BY THE RULES AND REGULATIONS ESTABLISHED BY PINK HEALS:

SIGNATURE: _____

DATE: _____

TEAM NAME: _____

CONTACT NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

CATAGORIES YOUR TEAM WILL BE ENTERING:

ENTRY FEE: \$150

Must include payment with entry form

FOR ADDITIONAL INFORMATION:

Eddie McDonald
251-747-0211, Pinkhealsalabama@yahoo.com

Make checks payable to:

Pink Heals Alabama
P.O. Box 1054
Robertsdale, AL 36567