

**Chili & Brunswick Stew Team
Application & Agreement**

CONTACT INFO

Amateur Team Name OR Restaurant Name _____

Please check one (If you are doing both food items you can compete in both competitions):

Chili Brunswick Stew Chili & Brunswick Stew

Sponsoring Organization, if applicable: _____

Contact (s) Name(s): _____

Address: _____

Email: _____ Website: _____

Phone: _____ Cell: _____

NO TEAM IS ALLOWED TO GIVE, SELL FOOD, WATER OR BEVRAGES OF ANY KIND.

A minimum of 7 gallons (10 gallons is recommended) of chili and/or Brunswick stew.

FOOD PREPARATION & STORAGE REQUIREMENTS

Location Where Food Will Be Prepared: **Cooking Onsite** **Cooking Offsite**

Vendor must check "Yes" to both and understands they are responsible by law for maintaining all food temperature requirements.

Hot food will be cooked to at least 140°F **Yes** Cold food will be maintained at 41°F **Yes**

THE MORE CHILI YOU COOK - THE MORE SMAPLES YOU SERVE - THE MORE VOTES YOU GET!

Themed Tents Encouraged	Dress your team up for most spirited award
Chili and/or Brunswick Stew Booth 2 Spoons & Serving Cups <input type="checkbox"/> Yes - (\$85.00 per booth space)	Have you done this event?? <input type="checkbox"/> Yes <input type="checkbox"/> No ____ How many times
Need Electricity? (\$35.00 Per Outlet) <input type="checkbox"/> Yes <input type="checkbox"/> No ____ How many	Need a 10' x 10' tent? (\$150.00) <input type="checkbox"/> Yes <input type="checkbox"/> No
Need Table 6ft table? (\$20.00 Rental Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No	Please Total All Fees & Services Here \$ _____ . 00

PAYMENT & INFORMATION

Complete Application & Agreement to secure your space. **All Fees must be received by September 15th.**

Booth fees are nonrefundable. **Make Check Payable: ARMUS MEDIA GROUP, LLC**

Please submit app and payment by: FAX: 888.340.3484 OR EMAIL: Info@BrookhavenChiliCookOff.com

MAIL: **Armus Media Group, LLC**, 2870 Peachtree Rd., Atlanta, GA 30305

Credit Card Authorization: ____ VISA ____ MasterCard ____ Discover ____ AMEX

Card #: _____ Exp. Date: ____ / ____ 3 or 4 Digit Code: _____

Name on Card: _____ Signature _____ ZIP: _____

AGREEMENT ACCEPTANCE

TERMS & CONDITIONS: The EXHIBITOR/CONCESSIONAIRE shall indemnify and hold harmless Armus Media Group LLC. and the City of Brookhaven, its agents, employees, volunteers from and against all claims, damages, losses, expenses, including but not limited to attorney's fees, arising out of or resulting from (i) the conduct or management of the Premises or of any business therein, (ii) any act, omission, or negligence of the EXHIBITOR/CONCESSIONAIRE or the partners, directors, officers, agents, employees, invitees or contractors of the EXHIBITOR/CONCESSIONAIRE (iii) any accident, injury or damage whatsoever occurring in or at the Premises. EXHIBITOR/CONCESSIONAIRE hereby expressly indemnifies Armus Media Group, LLC and The City of Brookhaven for the consequences of any negligent act or omission of Armus Media Group LLC, the City of Brookhaven its agents, employees, and volunteers, unless such act or omission constitutes gross negligence or intentional misconduct.

Signature: _____

Date: _____