

Smoke on the Falls

Noccalula BBQ Competition and Festival

1600 Noccalula Rd.
Gadsden, AL 35904
Mailing Address – PO BOX 267
Gadsden, AL 35902

April 13-14, 2018

~PROFESSIONAL DIVISION~

Team Name: _____ KCBS #: _____
Team Captain: _____ Phone #: _____
Address: _____ City/State/Zip: _____
Email Address: _____



Please check all appropriate boxes that apply for your entry

Details and Information

Notes

Total

2 Night Stay—Thursday and Friday at Noccalula Falls Campground including power, water, 4 SOF Shirts, 8 armbands. Armbands must be worn all day on Saturday.

\$275.00

*Purchase additional armbands below if needed for teammates or family
(5.00 per armband).

Please Circle one

Shirt Sizes Needed

Tent—Camper—RV

Camper or RV Size: _____

Larger sites are limited

2 Night Stay—Friday and Saturday at Noccalula Falls Campground including power, water, 4 SOF Shirts, 8 armbands. Armbands must be worn all day on Saturday.

\$275.00

*Purchase additional armbands below if needed for teammates or family
(5.00 per armband).

Please Circle one

Shirt Sizes Needed

Tent—Camper—RV

Camper or RV Size: _____

Larger sites are limited

Additional nights stay at the Campground

\$15.00 per night

Night(s) Needed _____

*Additional armbands needed - \$5.00 per armband

_____ of armbands

Additional Shirts needed - \$10.00 per shirt

_____ Of Shirts

Shirt Sizes Needed _____

Private Port-a-John - \$85.00

Dean's Sausage Cook-Off (Held on Friday) Sausage will be provided - \$20.00

Family Discount—Teams that have participated in past years receive a \$25.00 discount

Year(s) Participated _____

\$10.00 Late fee if mailed after March 23, 2018

Make checks payable to the City of Gadsden or see Credit Card option below

Total Amount Due \$ _____

Circle One
Visa—MasterCard—Discover
(American Express not accepted)

Credit Card Number _____

Expiration Date _____

CVV Code _____

As you know the public is always very interested in tasting a sample of what you are cooking. Please consider making them feel they are a part of this BBQ experience. Please check to indicate that you would like to participate in our sample give-a-way on Saturday. Sample cups will be provided for you.

Waiver of Liability: In consideration of the committee 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 Smoke on the Falls BBQ Fest Committee (including City of Gadsden,) KANSAS CITY BARBEQUE SOCIETY, their agents, successors and assigns for any and all injuries suffered by me in this event. Further, I hereby grant full permission to the Smoke on the Falls committee and/or agents authorized by them, to photographs, videotapes, motion pictures, recordings or any other record of this event for any legitimate purpose. I agree to abide by the rules and regulations of the Smoke on the Falls Noccalula BBQ Fest and the KCBS.

Signature: _____ Date: _____