

D.J. CARLSON MEMORIAL FUND
BUST-N-BURN "BBQ" REGISTRATION FORM

HEAD COOK: First Name: _____ Last Name: _____

Company or Team Name: _____

Address: _____

(street)

(street address line 2)

City, State

Zip Code

Phone Number: (____) _____ **email:** _____

2nd Cook: First Name: _____ Last Name: _____

3rd Cook: First name: _____ Last Name: _____

Registration Items: BBQ Cook Off Entry \$200.00

Jackpot – Cooks Choice \$ 25.00

Jackpot – Jackpot Beans \$25.00

Jackpot – Dessert \$ 25.00

Jackpot – Mixed Drink \$ 25.00

Please total all items above:

TOTAL \$ _____

Applicant Signature: _____ **Date:** _____

Please make check payable to: DJ Carlson Memorial Fund

Mail Application and Check to: DJ Carlson Memorial Fund

PO Box 173

Devine, TX 78016

For Rules & Regulations pertaining to the BBQ Cook-Off, please download the ICBA rules from of our website at: www.bustnburn.com