



## This event is sanctioned by the SLBS.

Submit Registration packet and payment **EITHER** by mailing hard copy, **OR** electronically.

**Hard Copy:** Mail checks and packet (Payable to FCC Behavioral Health) to Carolyn Polk at #5 Sugar Creek Road, Piedmont, MO 63957

**Electronically:** Submit packet to [Carolyn.Polk@fccinc.org](mailto:Carolyn.Polk@fccinc.org) and pay registration at Venmo and note what team is being paid for.

Battleforlife BBQ

@Carolyn-Polk-13



**venmo**

For Questions, call Carolyn Polk at 573-223-4169 or e-mail [Carolyn.Polk@fccinc.org](mailto:Carolyn.Polk@fccinc.org)

### Follow us on Facebook at Battle for Life BBQ to stay up to date with any new information!

Standard turn-in times of 1:00 (chicken), 1:30 (ribs), 2:00 (pork)

Place		Prize			
Grand Champion		\$800	20		
Reserve Grand Champion		\$600	15		
1st		\$1,200	30		
2nd		\$825	20		
3rd		\$600	15		
<b>Total Payout</b>		<b>4,025</b>	<b>100%</b>		
Category 1			Prize		
1st	\$400	1st	\$400	1st	\$400
2nd	\$275	2nd	\$275	2nd	\$275
3rd	\$200	3rd	\$200	3rd	\$200
<b>Total Payout</b>	<b>\$875</b>	<b>Total Payout</b>	<b>\$875</b>	<b>Total Payout</b>	<b>\$875</b>



# 4th Annual Battle for Life BBQ Team Registration

## Saturday September 14<sup>th</sup>, 2024

### Minimum \$4,000 Payout

(Amount may increase based on registrations or donations)

\$150 for registrations made on or before August 23, 2024.

\$175 for registrations made on or after August 24, 2024.

**Note: Registration deadline is September 6, 2024.**

Team Name: \_\_\_\_\_ SLBS Team Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_ SLBS Member Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**(Additional percentage may be donated to suicide prevention for tax purposes)**

\_\_\_\_\_ Entry fee of \$\_\_\_\_\_ is included.

\_\_\_\_\_ Entry fee of \$\_\_\_\_\_ paid on Venmo by \_\_\_\_\_

\_\_\_\_\_ Signed liability waiver is included.

\_\_\_\_\_ I would also like to make a tax-deductible donation for suicide prevention in the amount of \$\_\_\_\_\_.

# 4<sup>th</sup> Annual Battle for Life BBQ

## WAIVER OF LIABILITY

In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my teammates, our heirs, executors and administrators, waive and release any and all rights and claims for damages that I or my team may have against FCC Behavioral Health, Piedmont Area Chamber of Commerce or the City of Piedmont, any sponsors, vendors or volunteers of the event for any and all injuries suffered by me or my team in this event.

Further, I hereby grant full permission to FCC Behavioral Health, the Piedmont Area Chamber of Commerce and any agents sponsored by them to use any photographs, video recording and any other record of this event for legitimate purposes.

I agree to the terms of the Waiver of Liability and all Rules and Regulations.

Name (printed) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_