



City of Pharr  
 Hub Phestival  
 Cook-Off  
 April 7, 2018  
 Pharr, Texas



Entry Form

Team Name: \_\_\_\_\_

Team Captain: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**IBCA Categories: Chicken, Ribs & Brisket** \_\_\_\_\_

**Jackpot Categories: Fajitas** \_\_\_\_\_ **Beans** \_\_\_\_\_

Entry Fee: \$ 150.00 for all 3 IBCA categories and \$20 for each jackpot category.  
 Pre-registration for the event is recommended. The event is limited to 55 teams.  
 All checks should be made payable to City of Pharr.

**Attn: Parks & Recreation Dept.**  
**Hub Phestival Cook-Off**  
**413 E. Clark Ave**  
**Pharr, TX 78577**

Waiver of Liability

In consideration of accepting this entry, I the undersigned recognize that I will assume all risks that may arise from participation in this event. I also hereby waive any claims against the City of Pharr, Hub Phestival committee and all others associated with this contest from any injuries or loss that may occur. Further, I grant full permission to the City of Pharr or any of their agents to use any photographs, video recordings or any other records of the event for any legitimate purposes.

Signature of Chief Cook: \_\_\_\_\_ Date: \_\_\_\_\_



For office use only	
Date	_____
Amount	_____
Cash/Check	_____
Receipt #	_____
Staff	_____