



CHILI COOK-OFF ENTRY FORM

COOKING TEAM NAME: _____

CONTACT NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

EMAIL: _____

ATTENDEE NAMES: _____

Please specify category you would like to enter. You may enter both categories:

_____ Chili \$50 per entry _____ Fajitas \$20 per entry

Electricity will NOT be available.

NAME (PRINTED): _____

SIGNATURE: _____

Please drop-off or mail Chili Cook-off Entry form and payment to:
West Columbia Chamber of Commerce & Visitor Center
P.O. Box 837
West Columbia TX 77486

ALL ENRTY FORMS & MONEY MUST BE TURNED IN NO LATER THAN NOVEMBER 29TH