

Cook Registration Form Date: \_\_\_\_\_ Location: \_\_\_\_\_

HEAD COOK \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY/ST/ ZIP \_\_\_\_\_  
 e-mail address \_\_\_\_\_  
 TEAM NAME \_\_\_\_\_  
 SHOW YES \_\_\_\_\_ NO \_\_\_\_\_ JUDGING CUP \_\_\_\_\_  
 (IF YES, also register on Show Registration form)

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	\$	\$	\$	\$	\$	\$	
Chili	Beans	Brisket	Chicken	Ribs			
					TOTAL PAID		
Chili	Beans	Brisket	Chicken	Ribs			
					TOTAL PAID		
Chili	Beans	Brisket	Chicken	Ribs			
					TOTAL PAID		
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