

Official Judges Application Form

# BBQ Cook-off for a Cure

The Delaware Valley Chapter  
Of the  
National Hemophilia Foundation

Name \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Email: \_\_\_\_\_

Address \_\_\_\_\_

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

Certified KCBS Judge Yes\_\_\_ No\_\_\_ Judge # \_\_\_\_\_

**Note: You do not need to be Certified to Judge**

**Judges should arrive at 1PM but not later than 2PM on Saturday, May 22, 2010. Judging begins 3:00 PM. Awards will be presented at approximately 5:30 PM. This is not a KCBS-sanctioned event. The entries will be submitted against Modified KCBS rules with no presentation score.**

I, the undersigned intending to be legally bound, hereby for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against The Delaware Valley Chapter of the National Hemophilia Foundation, or any individual or group responsible for the organization or management of The Delaware Valley Chapter of the National Hemophilia Foundation.

I hereby grant permission for The Delaware Valley Chapter of the National Hemophilia Foundation and/or agents authorized by them, to use any photographs, videotapes, motion pictures, recordings and any other record of this event for any legitimate purpose. I agree to abide by the rules and regulations of BBQ Cook-off for a Cure and its Representatives.

Signature of Judge \_\_\_\_\_ Date \_\_\_\_\_

**This release must be signed or entry will not be processed.**

Send form to:  
The Delaware Valley of the NHF  
222 S. Easton Rd.  
Suite 122  
Glenside, PA. 19038