

# Step Up For Soldiers Backyard BBQ Cook-Off

Where the BBQ Meets the Beach

Saturday, January 25, 2014

## WINE VENDOR APPLICATION

**Mail to: Step Up For Soldiers Backyard BBQ Cook-Off, P.O Box 155, Carolina Beach, NC 28428. Call Janet Knott, 910-431-8122 if you have any questions.**

Thank you for your interest in the Step Up For Soldiers Backyard BBQ Cook-Off. This application and registration fee must be received no later than December 30, 2013. Please provide the following information completely without leaving any blanks:

Name of Business (if applicable): \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

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

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

**Fee:** \$200 + 5% of sales.

## WAIVER AND RELEASE

I fully understand that participating in this event may result in accidents, illness, or injury. I and my business are voluntarily participating in the "Step Up For Soldiers Backyard BBQ Cook-Off" (hereinafter the "event") with complete understanding of the risks associated with participation in the event.

In consideration of your accepting my application and being allowed to participate in the "event", I the undersigned, intending to be legally bound, hereby for myself and my business, heirs, executors, administrators and assigns agree to release and hold harmless the premises and grounds owner, the Town of Carolina Beach, Step Up For Soldiers, its affiliates, agents, volunteers and employees, from all liability for any injuries and/or illnesses that may directly or indirectly result from my conduct or from my negligence in the event, and/or from the negligence of the premises owner or the negligence of the sponsors of the event, its affiliates, agents, volunteers and employees. I also acknowledge full and sole responsibility for any and all medical expenses that I may incur as a result of any injury and/or illness related to our participation in the event. I understand and agree that this Waiver and Release is binding upon my business and me. I agree to abide by the rules and regulations of the Step Up For Soldiers BBQ Cook-Off and the New Hanover County Board of Health. I also fully understand that for acceptance to the "event", I agree to submit a valid Liability insurance policy during the event period.

I hereby grant my consent and permission to Step Up For Soldiers, its affiliates, agents and employees, to use my name, my business name, photographs, videotape, motion picture recording, voice, or likeness for their purposes, including pre and post event publicity.

I have carefully read this Waiver and Release and fully understand its contents. By my signature below, I on behalf of my business, consent and agree to the terms of this Waiver and Release.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Printed Name and Name of Business