Contest Application

GEORGIA BBQ ASSOCIATION
P.O. Box 193
Dacula, Ga. 30019

Contest Name: _____

Type of Contest: ☐GBA Sanctioned Barbecue Contest ☐In Association With GBA

Contest Location (Street Address): _____

City & State: _____Requested Contest Date:_____

Sponsoring Organization: _____ Estimated Number of Teams Expected: _____

Contest Organizer Contact Information

Contest Organizer Name: _____

Mailing Address: _____

Preferred Telephone: _____Email Address: _____

To fully execute the sanctioning application, please complete application, sign, and return with the **$400.00 Sanctioning Fee ($200 for New Contests)** to the address above. By signing and submitting this request, the contest organizer acknowledges that they have read, understood, and agreed to the commitments they are making and that the contest organizer and any sponsors agree to be bound by the terms of the agreement.

Organizer's Signature: _____Date: _____

No Contest is sanctioned by the GBA until the GBA Director of Competition has reviewed and approved the packet.

Reserved For GBA Use

Sanctioning Fee Received: ____/_____/_____

Amount: $_____

Receiving GBA Official: _____