





The 18th Annual ORIGINAL SD BBQ CHAMPIONSHIPS ENTRY FORM June 6 and June 7, 2025

Fill out the application below and return with payment.

Team Name:			
Contact Name:	KCBS #:		
Address:			Refer a new team to
City:	State:Zip:_		participate in the Master Series BBQ
Phone:	Email Address:		Competition and
T-shirt Size (Complimen * Each team registered will re	tary):eceive (1) complimentary t-shirt.		receive \$50 off entry fee for both teams! Call for more
Additional T-Shirts Pre- \$20/S-XL t-shirt, or \$25/2XL	Order (Quantity and Sizes): and larger		information.
Length of Trailer/Campo *Please provide the total space	er:ee you'll be taking up. Knowing this informati	ion will ease placement.	
☐ We are a new team.	Referred by:		
	Referred by: (Person's name	e) (Team name)	
* Four meats are Pork Ribs, I * Must adhere to KCBS rules * One Meat Competitio * Meat is pork ribs. Contest * Must adhere to KCBS rules * Referral promotion does no	on – \$100 (*Early Bird discount–\$75 by will be held on Friday, June 7.	r April 15)	est.
* Meat is provided to teams.	Cash prizes in each meat division and judging cate	gory.	
Payment Type Cash Chec	k# Master Card	Visa Discover	
Credit Card #:	Exp. Date:	CVV:	
Proceeds to go to the South D Attn: Candi Briley, 1060 3rd	Dakota State Fair Foundation. Make checks p. 18t. SW, Huron, SD 57350.	payable to: "SD BBQ Championships"	Please mail to: SD State Fair,
Cancellation Policy: Refu	nds for cancellation are on a case-by-case	basis. A \$50 administrative fee wi	ll be kept on any refunds given.
and claims for damages I may have as successors, and/or assigns, for any and	s entry, I, the undersigned, intending to be legally bound, he gainst the "SD BBQ Championships", "The South Dakota dall injuries suffered by me in this event. Further, I herebized by them, to use any photographs, videotapes, motion	State Fair" & "Huron Chamber & Visitors Bureau y grant full permission to "SD BBQ Championship	"their benefactors, representatives, ps", "SD State Fair" & "Huron Chamber and
Signature of Chief Coo	ok	Date:	
Parent/Guardian_ (If under 18 years of age)		Date:	