

2024 Cook Team Application

Team Leader Name (Print):	
On behalf of my team/organization/business, I acknowledge that I have read and understand the Event Rules and agree to be bound by said rules. Furthermore, I have read, understand and agree to the Waiver of Liability.	
Team Leader Signature:	
Team Name (Organization/Business/Company):	
**Team Leaders contact information required	
Cell Phone:	
Email Address:	
Registration must be received by June 1, 2024 to be guarante meeting.	ed a t-shirt. T-shirts will be given at the cooks
Team Shirts (Up to 2 total)	Corbin Tourism Use Only
SM XL	Pending Payment Date
MED XXL	Addtnl Team Band PD
LG	PD Online
Additional Team Bands (\$10 each) MAX 4:	Amount: \$ Date Check Received: