

**Wonder City Wordfest
Pastry Competition
11 a.m. to 12:30 p. m., April 27, 2019**

Pastry Competition, Individual/Team Name: _____

Phone #: _____

Email Address: _____

If competing as a team, list each member: _____

**Entry Title and
Description** _____

Entry Poetic/Creative Motto/Line to be displayed on the Taste Table

Mail form to Roxann Yates, P. O. Box 222, Locust Grove, OK 74352, or drop off form at Wonder City Coffee.

Awards: Pastry Competition: 1st Place, \$200, 2nd Place, WCC gift card, Tasters' Choice, WCC gift card

Pastry Competition Registration: Chefs must set up by 11 a.m., April 27, 2019 and provide enough treats for at least 30 people. Chefs must also fill out the attached forms and send in by April 22, 2019.

Judging: 1st and 2nd place will be determined by a blind taste test by area foodies. The Taster's Choice will be popular vote of the audience.

Rules: All pastry cooks will be responsible for maintaining sanitary requirements.

By signing this document, the contestant agrees to abide by all rules and regulations set forth or established by the Wonder City Wordfest Committee. If competing as a team, each member must sign.

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____

RELEASE AND WAIVER OF LIABILITY

It is my wish to participate in the Wonder City Wordfest Competition being held on April 27, 2019 at Wonder City Coffee. I understand, appreciate, and acknowledge that property damage and injuries or food illness may occur at such events. I fully assume the risk of such property damage and personal injuries, and food illness, and I participate in this voluntarily and with my full knowledge of the inherent risks.

I hereby waive and release any and all rights that either my heirs, successors, and assigns or I may have against Wonder City Coffee, Wonder City Wordfest, its Board of Supervisors, their agents, servants, and/or employees, arising from participation in this event, including, but not limited to property damage and personal injuries and food illnesses. I further agree to indemnify and hold harmless all of the foregoing from any claim which may be made by me or on behalf by other third parties which might be made against me by others, arising from my participation in the foregoing event.

This waiver shall remain valid and may not be unilaterally rescinded by the participant. This form is to be signed by participant or if participant is less than 18 years of age to be signed by the parent or legally responsible guardian.

In addition to the release and waiver of liability, signing this form acknowledges that you have read and fully understand the Wonder City Wordfest rules. Also, by signing, I give permission for my or my child's name and image to be used to advertise this event and to announce the winners of this competition in local newspapers and other advertisements.

Signature (parent if minor): _____ **Date** _____

This form MUST BE signed and returned with your application and entry fee. Pastry competitors must return the forms by April 22, 2019.