



35th ANNUAL CHILI COOK-OFF



DEADLINE TO ENTER: OCTOBER 12TH 2024
10/8/2024

Sponsored by:



RULES & ENTRY:

- Entry forms and \$10 registration fee must be in the Chamber office by 5:00pm on Tuesday, October 8th. No refunds. Rain or shine. Please be committed to attend. Drop off or mail check with entry form to the Wellington Area Chamber of Commerce/CVB, 208 N Washington, Wellington, KS 67152. You may contact us at 620 326-7466 or email at director@wellingtonkschamber.com with any questions or to submit payment.
- The 2024 Fall Festival is Saturday, October 12th in Heritage Park (next to Memorial Auditorium) from 9AM - 2PM. Please plan to be present for the full duration. There will also be an Arts & Crafts Fair inside the Memorial Auditorium and other activities in Heritage Park.
- Booth/Table space will assigned at meeting, 9AM Saturday morning. This is a mandatory meeting. We will meet at the outside stage. If the head cook/contact person is not available for this meeting, please be sure to send a representative of your team.
- Bring your prepared Chili!! No alcohol can be used in the chili. Electric hookups are provided by the Chamber/City of Wellington. No open fires will be allowed. Extension cords are NOT provided. Please provide your own tables/chairs/canopy. (Tables can be rented for fee of \$6 each)
- Teams are required to prepare a minimum of one roaster full of chili (about 5 gallons,) but we encourage you to prepare more, as the judges will take 8oz for judging. No add-ons are permitted ie; Cheese, Fritos, Sour cream etc... At 11:30AM, the Chamber will collect the 8oz competition chili in a cup provided by the Chamber. Tasting kits will go on sale at 10:00 am.
- Winning team will be chosen and announced and presented their awards at 1:30pm on the Stage in Heritage Park for: Best Chili: \$100 Cash Prize! One winner overall will be selected for the People's Choice award: Trophy + \$50 Chamber Bucks!
- Items of any kind may not be given away in exchange for People's Choice votes. This action shall result in disqualification.

TEAM NAME: _____

HEAD COOK/ CONTACT PERSON: _____

CONTACT PHONE #: _____

CONTACT EMAIL: _____

ADMINISTRATIVE USE ONLY:

DATE RECEIVED _____ AMOUNT PAID _____



By submitting an entry to the Chili Cookoff Contest, I hereby release the Wellington Area Chamber of Commerce, The Fall Festival Committee, The Sponsors, and The City of Wellington from any liability whatsoever resulting from my participation in the 2024 Fall Festival Chili Cookoff Contest.