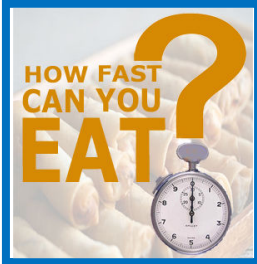




Egg Rolls Eating Contest - Entry Form & Rules

How fast can you eat?



Here is your chance to sign up for UCAF's 12th Annual Egg Roll Eating Contest at the South Florida Dragon Boat Festival.

Be one of many to win some prizes and have the chance for the title of becoming Champion of UCAF 2014 Egg Roll Eating Contest.

You must be at least 15 years of age to enter and have a form of I.D. ready at the contest.

All you have to do is fill out this Entry Form and submit it along with a \$5 entry fee (Cash) on Saturday, October 4, 2014 and come to eat eight Egg Rolls as fast as you could possibly eat.



R U L E S

- ✓ Must be 15 years of age or older to enter. Under 18 years of age, Contestant's parent/guardian must sign along with the Contestant.
- ✓ \$5 Entry Fee.
- ✓ Entry is limited to the first 20 applicants.
- ✓ Contestants may not touch the Egg Rolls until the starting signal.
- ✓ Only entire Egg Roll eaten will be counted.
- ✓ Contestants will have 8 egg rolls to the fastest time.
- ✓ Contestants may drink (non-alcoholic) beverage of their or organizer's choice while eating the Egg Rolls.
- ✓ The time will stop when the last of 8-Egg Rolls is completely to swallow and no contents remaining in contestant's mouths.
- ✓ Partially eaten Egg Rolls will not be counted.
- ✓ Visible signs of sickness will result in disqualification.

Acknowledgement of Risks & Waiver of Liability

- ✓ Eating large amounts of Egg Rolls is a potentially hazardous and uncomfortable activity. Contestant should not enter and eat unless he/she is medically capable and properly trained. All contestants must understand and agree that this is all in good fun, and possibly bad taste, and to be a good sport.
- ✓ All contestants agree to abide by any decision of the contest officials and any and all of contest rules.
- ✓ All contestants acknowledges that they assume all risks associated with eating in this event including, but not limited to, indigestion, that stuffed feeling, contact with other contestants, a general dislike for Egg Rolls after he/she is done, and all risks of personal injury, illness and possible loss of life, and risks of damage to or loss of personal property. Contestant, and anyone entitled to act on the contestant's behalf, agrees to waive and release United Chinese Association of Florida and all affiliated persons, entities, and groups, their vendors, their advertising, promotion and public relations agencies, co-sponsoring companies and their affiliates and agencies, from any and all claims or liabilities of any kind arising out of his/her participation in this event.
- ✓ Contestant does also consent to the use of their name, photograph, audio and video recording by the United Chinese Association of Florida for any and all purposes.

P L E A S E P R I N T

Name:	eAddress:	Born After 10 / 4 / 1999 <input type="checkbox"/>
Address:	City	State Zip Code
		Phone:

Certification and Signature: I certify that the information provided on this entry form is correct and that I have carefully read, understand and accept the terms of the UCAF's Egg Rolls Eating Contest Entry Form and Rules. My signature indicates my understanding and assumption of the risks and my voluntary participation in this contest.

Contestant's Signature:	Date:
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If the Contestant is a minor - parent or guardian must sign and agree to UCAF's Egg Rolls Eating Contest at the 11th South Florida Dragon Boat Festival – Official Contest Rules as well as to the conditions below.

I, as the parent or guardian of the Contestant, acknowledge that by signing this document, I am in addition to the Contestant, assuming the responsibility of educating and informing the Contestant of the waiver, indemnity and consent. I will also be bound by the terms as it relates to the Contestant and as if the same terms have been directly agree to by me.

Also in consideration of the Organizer permitting the Contestant to participate at the UCAF's Egg Rolls Eating Contest, I agree to save harmless and indemnify the Organizer or any Sponsors from any claims, actions, damages, expenses, costs arising out of the actions of the Contestant or from any claims, actions, damages, expenses or costs claimed or made by the Volunteer arising from the activities and actions of the Contestant while competing.



Signature of Parent/Guardian (If Contestant under 18):	Name:	Date:
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For Organizer Use Only

Received Entry Fee by:	Approved by:	Date:
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QUESTIONNAIRE

Answer these 3 questions:

1. Do you have any physical or mental condition, injury, limitation or illness that can be or will be affected by your participation in this Contest? Please circle.

YES NO

2. Do you have any allergies that could affect your participation in this Contest? Please circle.

YES NO

If YES, please describe: _____

3. Do you understand that we may use a photograph or videotape of you during this Contest recognizing it will be used for promotional purposes? Please circle.

YES NO