



Haines City Rotary

## Chili Team Application

**Contacts Name:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Contact Phone #** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Chili Team Name:** \_\_\_\_\_

Mail this completed and signed form along with a \$25 check made payable to Haines City Rotary

to: Haines City Rotary  
P.O. Box 2501  
Haines City FL 33845

**Yes I need electric Hook up (please check if you will need electric)**

I ACKNOWLEDGE THAT I AM OVER THE AGE OF 18 YEARS. I agree to have my booth set up at my assigned space by 11:00a.m. on 03/19/2022 and will leave my assigned space as clean as I found it by 4:00 P.M. on the same date. I agree to provide 4 gallons of chili for the purpose of samples to the public. I agree to keep my chili at a sufficient heat to keep it safe for consumption. **I agree that all servers on team will wear a face mask and gloves while serving to the public and will practice safe "social distancing"**. I understand that I will have a person at my booth at all times during the event. I understand that I cannot sell the chili. I agree to allow any pictures taken of me or my team to be published.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_