



Chili Cook Registration Form

Saturday, June 20, 2020
Historic Downtown Mount Airy
11:00 a.m. to 6:00 p.m.

Applicant Name: _____

Restaurant Name: _____

Team Name: _____

Web Address: _____

Applicant E-mail: _____ Phone Number: _____

Mailing Address: _____

Restaurant Entry Fee \$15.00 Payable to Carroll County Health Department

Detailed Description of Chili: _____

By signing, the applicant agrees to participate in the 2020 Hometown Chili Cook-off and Custom Car Show in Historic Downtown Mount Airy, Maryland, on Saturday, June 20, 2020 from 11:00 a.m. to 6:00 p.m.

Full Event day details and instructions will be emailed 2 weeks prior to the event.

Signature: _____ Date _____

All registration forms must be submitted by Friday, May 31, 2019

Mail your completed registration to:
Mount Airy Main Street Association
Attn: Chili Cook-Off
P.O. Box 788
Mount Airy, MD 21771

Contact Information:
Pamela Reed

301.524.2512
Reedpa01@yahoo.com
Website: www.mountairymainstreet.org