



Pie Eating Contest

ENTRY FORM, RULES & WAIVER

\$10.00 entry fee to compete – to benefit the Milford's Pioneer Days/
Quasquicentennial celebration of 2017

Contest is open to only **the first 10 people who register!**

All contestants must be registered and checked in by 9:00PM on day of contest

Contestants must be 16 or over – Entry form must be signed by parent or guardian if under 18.

The object is to eat as much of a Pie, with water as the only beverage within 10 minutes. (*Water will be provided*)

Contestants will wait for the whistle to start – Contest will be timed with a stopwatch.

Any pie in contestants mouth at the final whistle is counted – provided it is then swallowed.

Dunking and crunching the pie is NOT permitted.

The use of hands or utensils are not permitted.

At the end of the 10 minutes each pie plate will be weighed and the contestant who has eaten the most pie wins

Contestants must not touch pie until the whistle begins the contest.

Any contestant caught breaking any of the rules will be disqualified.

WINNER GETS \$50.00, 2nd - \$30, 3rd - \$20, 4th - \$15, 5th - \$10

Pie Eating Contest

ENTRY FORM

First Name: _____ Last Name: _____

Address: _____

Phone: _____ Email: _____

Date of Birth: _____ Age _____

Emergency Contact Name and Phone : _____

Do you have any serious medical conditions or injury that may be affected by this contest?

Please circle: YES/NO If yes, please explain in detail _____

Do you have any allergies? **Please circle:** YES/NO If yes, please explain in detail:

Contestants will acknowledge there are risks associated with this event, which include, but are not limited to personal injury, risk of illness and possibly death, risk of loss or damage to personal property. Contestant voluntarily enters The Pie Eating Contest and in doing so assumes all of these risks. Contestant upon entry of this contest and upon signing this form hereby agrees to waive and release Milford Commercial Club/Pioneer Days & Quasquicentennial Committee and all associates, volunteers, sponsors, vendors as well as any of their affiliates and successors from any liabilities of any kind arising from this event. Contestant has read all of the above rules and agrees to follow them. Contestant also hereby swears that to the best of their knowledge they are physically and mentally fit to compete in this contest.

Signature of Contestant or Parent or Guardian

Date

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WAIVER

I know that eating large amounts of food is potentially hazardous and is an uncomfortable activity. I should not enter and eat unless I am medically capable and properly trained. I realize that this is in good fun and possibly bad taste, but I agree to be a good sport. I agree to abide by any decision of the contest officials and all of the contest rules. I assume all risks associated with eating in this type of event including but not limited to indigestion, that stuffed feeling, contact with other contestants, and a general dislike for hot dogs after I am done, and all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of you accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Milford Commercial Club/Pioneer Days & Quasquicentennial Commitee, their representatives, sponsors, and their successors from all claims of liabilities of any kind arising out of my participation in this event.

Contestant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

(If contestant is under 18 years of age)