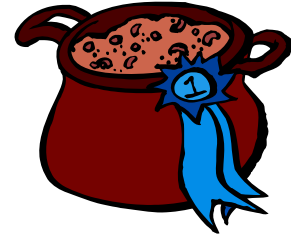
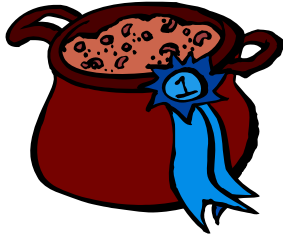




GREENFIELD RECREATION DEPARTMENT

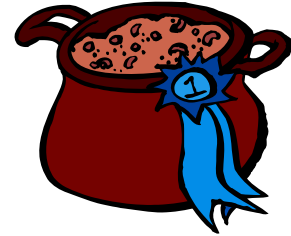
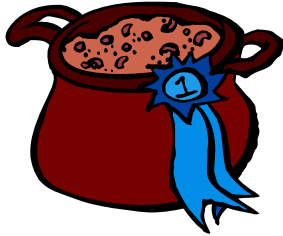
20 Sanderson Street, Greenfield, MA 01301
PHONE (413) 772-1553 ☎ FAX (413) 773-0115
www.greenfieldrecreation.com
Christy.moore@greenfield-ma.gov



Chili Cook-Off Rules

1. Pre-registration required. Entries limited to one per person. Entries accepted on a rolling basis; total competitors limited to 20. Must complete registration form and return to the Recreation Department ahead of event.
2. Competition drop off is 11:30am on Sunday, February 4th at Beacon Field Beacon Street parking lot. Please do not drive in the lot. A volunteer will meet you at the barricades to collect the chili.
3. Chili Guidelines:
 - a. Meat or Vegetarian Chili may be submitted.
 - b. Entries may include beans, chili peppers, various spices and other ingredients.
 - c. Seafood is allowed.
 - d. Chili marked as "Vegetarian" must not contain meat and/or any meat by-product. The use of soy and meatless "meat" substitutes is allowed.
4. Each contestant must provide a crock-pot full of chili (4-5 quarts).
5. Chili must be brought ready to serve.
6. Contestants are responsible for supplying their own crock-pot. An electrical outlet will be available for each entry. Spoons and cups for use in serving chili to the general public will be provided.
7. Each contestant will be assigned a "contest number" to ensure a blind vote.
8. An award for "Best Chili Around" will be presented to the entry with the most votes. Winner announced at 3:45pm.
9. The results are final and based on votes by the general public.
10. Each contestant is responsible for removing their items from the area at 4:00pm. There will not be an area for cleaning. Any items left behind will be discarded.

**GREENFIELD WINTER CARNIVAL
CHILI COOK-OFF PARTICIPATION FORM
SUNDAY, FEBRUARY 4TH, 2024**



**DROP OFF 4-5 QUARTS OF CHILI IN CROCK-POT
AT THE BEACON STREET PARKING LOT OF BEACON FIELD
(VOLUNTEER WILL MEET YOU AT BARRICADES)
ON SUNDAY, FEBRUARY 4TH, AT 11:30AM**

CONTACT INFORMATION:

Entry Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

PLEASE CHECK ALL THAT APPLY REGARDING YOUR CHILI ENTRY:

Type: Meat: _____ Vegetarian

Taste: Sweet Spicy Smoky Other: _____

Allergens:

Contains: Dairy Eggs Tree Nuts Peanuts Shellfish
 Wheat Soy Fish Other: _____



Please Contact Christy Moore, Recreation Director with any questions:
413-772-1553 Fax 413-773-0115 christy.moore@greenfield-ma.gov

Or mail this form to:

Greenfield Recreation Department, 20 Sanderson Street, Greenfield, MA 01301

