



**United Way of Harrison County, Inc.**  
**“Hot Wing Eating Contest”**

**February 6, 2019 - Begins at 6:00 p.m. at  
Buffalo Wild Wings Grill & Bar, 45 Betten Court, Bridgeport, WV**

**OFFICIAL CONTEST RULES AND ENTRY FORM**

**Submit application by US Mail or email to:**

- United Way of Harrison County, Inc.  
445 West Main Street, Suite 203  
Clarksburg, WV 26301
- Email: [tyoke@unitedwayhcwv.org](mailto:tyoke@unitedwayhcwv.org) – Specify subject of email as “Hot Wing Contest”

A United Way of Harrison County, Inc. staff member will respond to your request during business hours.  
Monday – Friday, between 8:00 a.m. - 4:30 p.m. If you have not heard back within one business day, please call to verify receipt at (304) 624-6337.

**\*\*\*\*\*Entry Form due by February 6, 2019 and must include signed Waiver of Liability \*\*\*\*\***

**PLEASE PRINT CLEARLY**

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, & Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**How did you hear about this contest?**

- |  |  |
|--|--|
| <input type="checkbox"/> Newspaper       | <input type="checkbox"/> Newsletter    |
| <input type="checkbox"/> Radio/TV        | <input type="checkbox"/> From a Friend |
| <input type="checkbox"/> Poster or Flyer | <input type="checkbox"/> Other _____   |

**I AGREE TO NOT CONTEST THE OUTCOME AND ANY PART OR ASPECT OF THIS CONTEST.**

**CERTIFICATION AND SIGNATURE:** I certify that the information provided is correct and that I have carefully read, understand and accept the terms of the United Way of Harrison County, Inc. Hot Wing Eating Contest Official Contest Rules and Entry Form. As condition of competing in the contest, my signature indicates my understanding and assumption of the risks and my voluntary participation in this contest.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR OFFICIAL USE ONLY:**

Entry Form Received: \_\_\_\_\_

Entry Form Approved by: \_\_\_\_\_

Date Received: \_\_\_\_\_

**\$15.00 Registration Fee:** Cash \_\_\_\_\_ Check \_\_\_\_\_ Check # \_\_\_\_\_

## **RULES & WAIVER OF LIABILITY:**

**ELIGIBILITY:** Contest is open to all U.S. residents 18 years or older. Employees of United Way of Harrison County, Inc. are not eligible to enter. Void where prohibited.

**CONTEST AND COMPETITION:** This is a fundraising competition as well as a wing eating competition. There will be three (3) Prize Winners:

**1<sup>st</sup> Prize** – The Contestant **who raises the most money** by the number of wings eaten in eight (8) minutes.

**2<sup>nd</sup> Prize** – The **Male** contestant who eats the most wings in eight (8) minutes  
The **Female** contestant who eats the most wings in eight (8) minutes

**TO ENTER:** READ CAREFULLY THE OFFICIAL CONTEST RULES AND ENTRY FORM INCLUDING THE ELIGIBILITY REQUIREMENTS AND WAIVER OF LIABILITY PROVISIONS.

**Complete and sign this document below. All entry forms become the property of United Way of Harrison County, Inc.**

**OFFICIAL RULES:** 1. The United Way of Harrison County, Inc. hot wing eating contest is open to all **amateur** eaters 18 years or older who are in good health. Professional eaters, persons recognized by the Association of Independent Competitive Eaters (AICE), the International Federation of Competitive Eating (IFOCE) or members of any professional eating organization are not eligible. 2. Any competitor with a serious ailment or health problem may not compete in the contest. 3. Competitors must eat sitting down at their designated area. 4. If a competitor vomits or regurgitates at any time during the competition or during the time period the wing count is being tallied, he or she will be disqualified. 5. The use of utensils is not allowed. 6. Chicken meat must be eaten directly from the bones using the mouth and teeth only. Chicken cannot be pulled from the bones with fingers. Contestants must complete eating one chicken wing before proceeding to the next chicken wing. 7. Competitors may not touch the wing basket or wings in the basket before the contest begins. 8. Competitors must place each and every finished chicken wing bone back in the wing basket. 9. Contestants must stop eating and must promptly place their hands down on the table at the ending signal. 10. If contingencies or disputes arise at the contest/before, during or after, that is not explicitly covered by these official rules, the Executive Judge's decision will stand with the same finality as the rules.

### Grounds for disqualification include:

- False or incomplete entry form or liability waiver.
- Any health risks that could jeopardize the contestant's health or well-being.
- Under the influence of any substance such as alcohol or drugs.
- Starting prior to the start signal.
- \* Continuing to eat after the ending signal.
- \* Throwing up or regurgitating during the competition.

**FINAL AUTHORITY:** In the event of a tie, after a brief interval, 1 minute and 30 second eat-offs will take place until a winner is selected.

**PRIZE AWARDS:** Prizes will be awarded at the conclusion of the competition.

**MEDIA AND PUBLICITY:** All winners and participants agree to the use of their name, voice, likeness for advertising or trade purposes and to cooperate reasonably in any effort to promote or publicize United Way of Harrison County, Inc. or this contest. Apart from the prizes associated with being selected as a winner, United Way of Harrison County, Inc. shall not be obligated to compensate winners/participants in any way for such publicity.

## **ACKNOWLEDGEMENT OF RISKS AND WAIVER OF LIABILITY:**

Contestant acknowledges that there are risks of personal injury, illness and possible loss of life, and risks of damage to or loss of personal property, which may result from participating in this contest. Contestant voluntarily enters United Way of Harrison County, Inc. Wing Competition and assumes all of these risks. Contestant, as a condition of entry, agrees to indemnify, defend and hold harmless United Way of Harrison County, Inc. and affiliates, Buffalo Wild Wings, their advertising, promotion and public relations, co-sponsoring companies and their affiliates and agencies, and all officers, directors, employees and agents of the aforesaid entities, from any and all claims and costs, including attorneys' fees, relating to, arising from or in connection with participation in this contest or the receipt or use of any prize. In so doing, contestant releases and indemnifies the aforesaid entities and individuals from liability for injuries or damages of any kind arising from or in connection with participation in this contest or the receipt or use of any prize. In no event shall United Way of Harrison County, Inc. be liable to a contestant for acts or omissions arising out of or related to the Contest or that contestant's participation in the contest.



**Event:** United Way of Harrison County Inc. Hot Wing Eating Contest  
**Date:** February 6, 2019 at 6:00 p.m.  
**Location:** Buffalo Wild Wings Grill & Bar  
45 Betten Court, Bridgeport, WV 26330

### WAIVER OF LIABILITY/PERMISSION/MEDICAL RELEASE FORM

This form is necessary for any contestant of the United Way of Harrison County, Inc. Wing Competition.

#### Submit application by US Mail, Fax or Email

- United Way of Harrison County, Inc.  
445 West Main Street, Suite 203  
Clarksburg, WV 26301
- Fax: (304) 624-4031
- Email: [tyoke@unitedwayhcvv.org](mailto:tyoke@unitedwayhcvv.org) or [briffee@unitedwayhcvv.org](mailto:briffee@unitedwayhcvv.org) – Specify subject of email as “Wing Competition”

A United Way of Harrison County, Inc. staff member will respond to your request during business hours. Monday – Friday, between 8:00 a.m. - 4:30 p.m. If you have not heard back within one business day, please call to verify receipt at (304) 624-6337.

**IMPORTANT: PARTICIPATION WILL NOT BE ALLOWED WITHOUT SUBMISSION AND VERIFICATION OF RECEIPT OF THIS COMPLETED FORM.**

Name of Contestant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_

My signature certifies that I am 18 years of age or older. I hereby release, indemnify and hold harmless United Way of Harrison County Inc., trustees, employees, agencies, sponsors, agents and assigns from any and all liability, damage, claim of any nature whatsoever arising out of or in any way related to my/participating in this contest. Participating in any activity is an acceptance of some risk of injury. I agree that my safety is primarily dependent upon my taking proper care of myself. I assume all risks related to the activities. In case of an emergency, I do hereby authorize a representative of United Way of Harrison County Inc. to consent to any medical treatment or care deemed advisable.

I have read and agree to comply with the rules and regulations of the United Way of Harrison County Inc. Wing Competition.

My signature below indicates that I have read, understand and freely signed this agreement. I expressly agree that this agreement shall be construed and enforced in accordance with West Virginia laws, and I consent to the jurisdiction of said state. I agree that this waiver and release is intended to be as broad and inclusive as permitted under West Virginia laws so that if any portion hereof is held invalid, the balance shall continue in full legal force and effect.

\_\_\_\_\_  
Signature of Contestant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

**UNITED WAY OF HARRISON COUNTY, INC.  
WING COMPETITION PLEDGE FORM**

Contestant I'm pledging for: \_\_\_\_\_

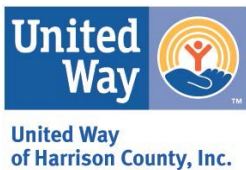
Pledge Amount	\$	Per Wing	\$	Flat Pledge Amount
	Per wing - I do not want to go over the amount of \$			

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_



*Pledges not paid by **February 6, 2019** will be billed to the donor. Checks should be written to the United Way of Harrison County. Proceeds benefit the United Way of Harrison County, Inc. 2017 Campaign fund. For more information about United Way please visit us at [www.unitedwayhcwv.org](http://www.unitedwayhcwv.org). Completed pledge forms are returned to contestant being sponsored, mailed to United Way of Harrison County, Inc., P. O. Box 2452, Clarksburg, WV 26302-2452 or emailed to [tyoke@unitedwayhcwv.org](mailto:tyoke@unitedwayhcwv.org) with a subject line of "Hot Wing Eating Contest."*



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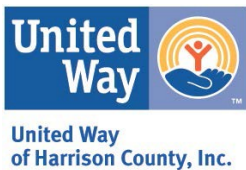
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	Per wing - I do not want to go over the amount of \$			

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	Per wing - I do not want to go over the amount of \$				Total

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_



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

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