



LA HABRA TAMALE FESTIVAL

SATURDAY, DECEMBER 4, 2021

2021 TAMALE FESTIVAL CONTEST INFORMATION

LOCATION: La Habra City Hall 110 E. La Habra Blvd.

JUDGING: 9:00 AM **WINNERS ANNOUNCEMENT:** 11:00 AM

CHECK IN/SET-UP: 8:00 TO 9:00 AM
(You must be ready for 9:00 AM Judging)

Advance registration recommended. Space is limited



No. Entries	Fee-Before Nov. 1 st	Fee-After Nov. 1 st
1	\$10	\$20
2	\$20	\$40

Mail or drop-off completed applications and payment to:

City of La Habra
Attn: Tamale Festival Contest
101 W. La Habra Blvd.
La Habra, CA 90631

Acceptable forms of payment: Cash, Check, Visa or Mastercard.

Please make checks payable to: City of La Habra

Three Divisions

Abuelita/ Abuelito
Grandparents 65 and older

Muchacha/ Muchacho
Youth age 17 and under

Senora/ Senior
Open division for everyone else

Two Categories

Savory
(Meat, Cheese, Veggie, Other)

Sweet
(Dessert, Corn, Other)

- A completed registration form is required to participate.
- Registration form and payment must be sent to the address above.
- You must prepare your dish at **home**. Please prepare enough servings (sample size for 6 people).
- Participants will be assigned one 8 or 6 foot long table.
- Participants **must** provide their own serving dishes, supplies and utensils. (Do not forget chafing dishes, sternos, pot holders, serving spoons, forks, napkins, and knives).
- Judging criteria will be based on the following:
 - The Table Showcase/Presentation (Table Décor, Background of Recipe, Plating of Tamale, etc.)
 - The Overall Taste (Quality of Masa, Filling, Sauce, Flavor, etc.)

Winners for each division and category will receive a cash prize (\$50 for 1st Place & \$25 for 2nd Place), which will be presented on the Main Stage at approximately 11:00 A.M.



2021 TAMALE FESTIVAL CONTEST APPLICATION

NAME _____

TELEPHONE _____

EMAIL _____

CITY OF RESIDENCE _____

DIVISION – CHECK ONE:

- DIVISION 1 ABUELITA/ ABUELITO (Grandparents Division)
- DIVISION 2 SENORA/ SENOR (Open Division)
- DIVISION 3 MUCHACHA/ MUCHACHO (Youth 17 and under)

CATEGORY – CHECK APPLICABLE ENTRY TYPE:

- SAVORY (Meat, Cheese, Veggie, Other) SWEET (Dessert, Corn, Etc.)

Recipe (Does not need to be specific, but must list ingredients):

The name of the dish, chef’s name, and recipe will be displayed on a card next to your dish.



RELEASE AND WAIVER OF ALL LIABILITY AND INDEMNITY AGREEMENT

For and in consideration of permitting X_____ to participate in the 2021 Tamale Festival Event sponsored by the City of La Habra’s Department of Community Services, the Undersigned hereby voluntarily releases, discharges, waives and relinquishes any and all actions or causes of action for personal injury, property damage or wrongful death occurring to him/herself arising as a result of participation in said recreational program or any activities incidental thereto wherever or however the same may occur and for whatever period said program may continue, and the Undersigned does for him/herself, his/her heirs, executors, administrators and assigns hereby release, waive, discharge and relinquish any action or cause of action, which may hereafter arise for him/herself and for his/her estate, and agrees that under no circumstances will he/she or his/her heirs, executors, administrators and assigns prosecute or present any claim for personal injury, property damage or wrongful death against the City of La Habra and its officers, officials, agents, contractors, volunteers, boards, departments, servants or employees for any of said causes of action, whether the same shall arise by the negligence of any of said persons, or otherwise. IT IS THE INTENTION OF X_____ BY THIS INSTRUMENT, TO EXEMPT AND RELIEVE THE CITY OF LA HABRA AND THE RELATED PARTIES MENTIONED HEREIN, FROM ALL LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY THE NEGLIGENCE OF ANY PERSON OR ENTITY.

The Undersigned, for him/himself, his/her heirs, executors, administrators or assigns agrees that in the event any claim for personal injuries, property damage or wrongful death shall be prosecuted against the City of La Habra and/or its officers, officials, agents, contractors, volunteers, boards, departments, servants or employees, he/she shall defend, indemnify and save harmless the same City of La Habra and the aforementioned related parties from any claim, cause of action, loss, liability, damage, lawsuit, cost or expense (including reasonable attorney’s fees) by whomever or wherever made or presented for said personal injuries, property damage or wrongful death.

In case of accident or other emergency, the Undersigned hereby gives permission for the City of La Habra and/or its officers, officials, agents, contractors, volunteers, boards, departments, servants or employees, to obtain emergency medical treatment. The Undersigned further agrees to pay any costs incurred as a result of such treatment. In addition, the Undersigned has been notified that participants involved in City-sponsored recreation programs are subject to being photographed or videotaped, and he/she hereby gives permission for the City of La Habra to use such photographs or videotapes to publicize and promote the City’s recreation programs.

THE UNDERSIGNED ACKNOWLEDGES THAT HE/SHE HAS PERSONALLY READ, UNDERSTANDS, AND VOLUNTARILY SIGNS THIS RELEASE AND WAIVER OF ALL LIABILITY AND INDEMNITY AGREEMENT, IS FULLY AWARE OF THE POTENTIAL RISKS AND HAZARDS WHICH ARE INHERENT TO ENGAGING IN THE SPECIFIED RECREATIONAL PROGRAM OR ANY ACTIVITIES INCIDENTAL THERETO, INCLUDING BUT NOT LIMITED TO, ANY NEGLIGENT ACTS PERFORMED BY THE CITY OF LA HABRA AND/OR ITS OFFICERS, OFFICIALS, AGENTS, CONTRACTORS, VOLUNTEERS, BOARDS, DEPARTMENTS, SERVANTS OR EMPLOYEES, NEGLIGENTLY CREATED OR MAINTAINED DANGEROUS CONDITIONS OF PUBLIC PROPERTY, WEATHER CONDITIONS, EQUIPMENT, MACHINERY, PLAYING CONDITIONS, OTHER PARTICIPANTS, ON-SITE PHYSICAL PREMISES, STRUCTURES OR SUBSTANTIAL WORKS OF IMPROVEMENT. THE UNDERSIGNED VOLUNTARILY ASSUMES ALL RISKS OF LOSS, DAMAGE, OR INJURY ASSOCIATED WITH HIS/HER PARTICIPATION IN THE SPECIFIED RECREATIONAL PROGRAM OR ANY ACTIVITIES INCIDENTAL THERETO.

Representative Name

Company/Group Name

Signature

Date