



**Great Culinary Classic 2010
October 9 & 10, 2010**



**APPLICATION / REGISTRATION
Sponsor
ACF Akron/Canton Cooks Association**

Mark Kent, Committee Chair
Phone: 330-972-6615 or 330-972-2349
Email: mk6@uakron.edu

Ken Bucholtz, President
Phone: 330-477-4545
Email: chefken@brooksidecc.com

Applications will NOT be accepted without categories and time preference designated.

Please put a (✓) by all categories of entry.

Cold Food: Entry Fee \$105.00 (per professional competitor, per category)

- () A - Cookery
- () B - Cookery

Cold Food: Entry Fee \$80.00 (per student competitor, per category)

- () SA - Cookery
- () SB - Cookery

Mystery Basket Professional: Entry Fee \$205.00 (per entry)

- () F1 - Mystery basket

Mystery Basket Professional: Entry Fee \$155.00 (per competitor, per entry); 2 ½ hour cook time, 3 courses, 8 portions

- () W - Wildcat, two person

Practical & Contemporary Hot Food Categories:

Entry Fee \$105.00 (per professional competitor, per category)

- | | | |
|------------------------------------|-----------------------|---------------------|
| () K1 - Game hen, Chicken or Duck | () K5 - Game Birds | () P1 - Patisserie |
| () K2 - Bone-in Pork Loin | () K6 - Bone-in Game | |
| () K3 - Bone-in Veal Loin or Rack | () K7 - Whole Rabbit | |
| () K4 - Bone-in Lamb Loin or Rack | () K9 - Fish | |

Entry Fee \$80.00 (per student competitor, per category)

- | | | |
|-------------------------------------|------------------------|----------------------|
| () SK1 - Game hen, Chicken or Duck | () SK5 - Game Birds | () SP1 - Patisserie |
| () SK2 - Bone-in Pork Loin | () SK6 - Bone-in Game | |
| () SK3 - Bone-in Veal Loin or Rack | () SK7 - Whole Rabbit | |
| () SK4 - Bone-in Lamb Loin or Rack | () SK9 - Fish | |

Please designate your time preference:

Saturday, October 9th

- () AM
- () PM
- () Anytime

Sunday, October 10th

- () AM
- () PM
- () Anytime



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COMPETITOR INFORMATION
One application per competitor.

****For Two Person Mystery please complete Section One and Section Two.****

****For Single Competitor Categories complete Section One only.****

Section One

Please PRINT clearly.	
Name:	
Address:	
City, State & Zip	
Contact Phone Number:	Fax Number:
Cell Phone:	Email Address:
ACF Certification	
ACF Chapter	
Address	
City, State and Zip	

Section Two

Please PRINT clearly.	
Name:	
Address:	
City, State & Zip	
Contact Phone Number:	Fax Number:
Cell Phone:	Email Address:
ACF Certification	
ACF Chapter	
Address	
City, State and Zip	



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Contact:

Anne Ladd
TriMark SS Kemp
4567 Willow Parkway
Cleveland, OH 44125
Email: aladd@sskemp.com

Competition Chair
Mark Kent, CEC
Phone: 330-972-6615 or 330-972-2349
Email: mk6@uakron.edu

Applications are accepted on a first come first served basis. Space is limited so please fax your application as soon as possible.

Fax Applications & Mail Checks to:	Make Checks Payable to:
Anne Ladd or Dinene Obed	TriMark SS Kemp
TriMark SS Kemp	
4567 Willow Parkway	Visa, MasterCard, Amex is accepted. Please call
Cleveland, OH 44125	Bonnie Kuhn at 216-429-8416 for credit card pay-
Fax: 216-377-6558 or 216-377-1720	ment only.
Email: aladd@sskemp.com or dobed@sskemp.com	

Note: Once your application is processed and check deposited, applicants will receive a confirmation letter with start times and specifics regarding competition logistics, directions, equipment, etc.

All schedule times will be coordinated by Chef Mark Kent and Chef Ken Bucholtz.

APPLICATION AND PAYMENT DEADLINE: September 17, 2010

ENTRY FEE: \$_____ per participant

**ALL ENTRY FORMS MUST INCLUDE PAYMENT.
MAKE CHECK PAYABLE TO TRIMARK SS KEMP.**

QUESTIONS: Call Anne Ladd – 216-429 8454 – aladd@sskemp.com