

	Agreement from Participant	
	FORM	

By signing this Agreement, I, as a Participant to the McAllen Business Plan Competition, agree to the following:

Initials

_____ I certify that the ideas and concepts set forth in the Business Idea are the original work of my team and do not, to the best of my knowledge, infringe on the intellectual property of any other party

_____ I have reviewed the Competition Rules as stated at the Official Rules document and appended here by reference, and by my signature below I certify that I agree to abide by the Rules

_____ I understand that the views expressed by the judges, co-sponsors, co-organizers, and my fellow Participants are their own and do not represent those of the McAllen Chamber of Commerce

_____ I understand that if I am awarded with funds it will be available only through third party pay

_____ I authorize the McAllen Chamber of Commerce to request a credit check of my persona

_____ I authorize the McAllen Chamber of Commerce to request a background check of my persona

Name						
Address		City		ZIP		State
Telephone	Social Security Number					
DOB	DL Number / State					
Signature (REQUIRED)				Date		

