

 McALLEN CHAMBER OF COMMERCE	Agreement from Participant	The McAllen BUSINESS.plan Competition
	FORM	MC-BD-FO-1222v00

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

- 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 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				
<div style="display: flex; justify-content: space-between; width: 80%; margin: auto;"> Signature (REQUIRED) Date </div>						