



## Tournament Entry Form/ Weigh-In Voucher

Boat # \_\_\_\_\_

Tournament Location \_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_

Phone # \_\_\_\_\_

Veteran or Active Military

Y / N

Hometown \_\_\_\_\_

Co-Angler Name \_\_\_\_\_

Phone # \_\_\_\_\_

Veteran or Active Military

Y / N

Hometown \_\_\_\_\_

Second Co-Angler Name \_\_\_\_\_

Phone # \_\_\_\_\_

Veteran or Active Military

Y / N

Hometown \_\_\_\_\_

**Day 1 Total Weight** \_\_\_\_\_

**Day 1 Big Fish** \_\_\_\_\_

**Day 2 Total Weight** \_\_\_\_\_

**Day 2 Big Fish** \_\_\_\_\_

**Event Total Weight** \_\_\_\_\_

\*\*\*\* I agree to adhere to all tournament rules set in place during tournament hours. I agree to release the organization and or the organizing personnel from any responsibility for damage or injury of my person or property resulting from participation in this event. I also agree to release the organization and or organizing personnel from any responsibility for such damage or injury claims from my family members as well as any person or persons claiming to represent such family or myself.

\*\*\*\* I agree to the administering of a polygraph tests if requested prior to prize payment. Failure of such test will result in forfeiture of all prizes.

\*\*\*\* I agree to provide my social security number (for taxes) in the event of prize money being paid.

\_\_\_\_\_  
Captain Signature

\_\_\_\_\_  
Co-Angler Signature

\_\_\_\_\_  
Second Co-Angler Signature