

Shooter Supply Big 20 Registration Form July 27<sup>th</sup>-28<sup>th</sup>

Team Name: \_\_\_\_\_

Team Captain \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

2<sup>nd</sup> Team member \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

3<sup>rd</sup> Team member \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

4<sup>th</sup> Team member \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Boat Registration Number: \_\_\_\_\_

**The following will be filled out by tournament personnel:**

Boat Number \_\_\_\_\_

Big 20 Weight \_\_\_\_\_ lbs      Big Fish Yes ( ) No ( ) Weight \_\_\_\_\_ lbs

Total Enclosed: \$ \_\_\_\_\_ (Cash Only)

I hereby certify that the weights stated above are correct to the best of my knowledge, and I release my team's right to protest as witnessed by a certified member of tournament staff below:

Team Member

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Tournament Staff Member

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

**LIABILITY AND MEDIA RELEASE WAIVER**

I have read and understand the tournament rules and hereby release and waive all parties pertaining to the 2019 Shooters Supply Big 20 with respect to injury, disability, death, loss or damage to person or property whether arising from negligence of those released or otherwise. I also give my consent that any media with my image obtained by tournament personnel at this event may be used for promotional or other purposes here forth.

Team Captain	Signature _____	Date _____
2 <sup>nd</sup> Team Member	Signature _____	Date _____
3 <sup>rd</sup> Team Member	Signature _____	Date _____
4 <sup>th</sup> Team Member	Signature _____	Date _____

If a participant is under the age of consent (18 years of age), then this release must be signed by a parent or guardian, as follows:

I hereby certify that I am the parent or guardian of \_\_\_\_\_, named above, and do hereby give my consent without reservation to the foregoing on behalf of this individual.

**Parent/Guardian Name:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Relationship to Participant:** \_\_\_\_\_

**Parent/Guardian signature:** \_\_\_\_\_