

Abu Garcia CPR Series Division/Championship ENTRY FORM

	Membership Per ngler (+ \$2.50 pro- cessing fee)	Entry Fee Per Team Division Entry Fee \$100 Championship Entry Fee \$100
	je j	
Ind	ividual \$40	\$100/\$100
Far	nily \$60	Total Enclosed \$
Individual Membership is valid for one person and good for all Series. Family membership is good for all series for the family in the household.		
Insurance Company: Policy #		
Membership ID #Jacket/Shirt Size:		
Name (Angler)		
Address		
		StZip
Social Security # Date of Birth		
Cell #E-Mail		
Please check if you: Facebook 🗌 Text 🔲		
Name (Marshall)		
-		StZip
	-	Date of Birth
Cell #E-Mail		
Please check if you: Facebook 🗌 Text 🔲		
TOU	RNAMENT LOCAT	IONDATE

We, the undersigned, agree to release, indemnify and hold harmless Fishers of Men Ministry Inc., its officers, sponsors, or anyone working with the trail for any damages, injuries, or death that occur as a result of our participation in this event, whether arising from negligence of said releases or otherwise to the fullest extent of the law, we also give permission for our quotes, pictures, or videos bearing our likeness to be used in promotional activities without compensation, and acknowledge that we have read and understand the tournament rules. This agreement is valid for full regular and post season events.

Marshall ____

GUARDIAN (IF REQUIRED)