



2025 Registration FORM

DATE: _____

ANGLER 1 INFO:

ANGLER 1 NAME: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

MAILING ADDRESS: _____

CITY / STATE / ZIP: _____

VEHICLE MAKE AND MODEL: _____

BOAT MANUFACTURER: _____

BOAT MOTOR MANUFACTURER: _____

ELECTRONICS MANUFACTURER: _____

ANCHOR SYSTEM MANUFACTURER: _____

JACK PLATE MANUFACTURER: _____

ANGLER 2 INFO:

ANGLER 2 NAME: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

MAILING ADDRESS: _____

CITY / STATE / ZIP: _____

BOAT MANUFACTURER: _____

BOAT MOTOR MANUFACTURER: _____

ELECTRONICS MANUFACTURER: _____

ANCHOR SYSTEM MANUFACTURER: _____

JACK PLATE MANUFACTURER: _____

In signing this registration, I hereby waive all other contestants, the host, sponsors and tournament officials from all claims of injury and / or damages incurred in connection with this tournament trail. I further understand and agree that the tournament directors reserve the right to refund the entry fee, if they choose, for any reason, not to accept this registration.

I agree to be subject to a PSA Test at Director's discretion. Any team who fails the PSA WILL BE BANNED FROM FURTHER TOURNAMENTS.

SIGNATURE: _____

SIGNATURE: _____

A parent or guardian of the above named youth under 16 years of age, I hereby consent to his or her entering this tournament circuit and release tournament directors from any and all responsibility for said youth.

SIGNATURE: _____

SIGNATURE: _____

