

Registration Form

2009 SCHEDULE > Registration Form

BUGGS ISLAND TEAM TOURNAMENT TOURNAMENT APPLICATION

(Official use only) DATE _____ TEAM NO. _____ BOAT NO. _____

NAME _____

ADDRESS _____

CITY _____ ST ____ ZIP _____

PH # (_____) _____

SS # _____ / _____ / _____ (required)

E-mail: _____

Membership No. _____

NAME _____

ADDRESS _____

CITY _____ ST ____ ZIP _____

PH # (_____) _____

SS # _____ / _____ / _____ (required)

E-mail: _____

Membership No. _____

Membership Fee \$ _____

Entry Fee \$ _____

Late Fee \$ _____

Big Fish \$ _____

Total \$ _____

A service charge of \$35.00 for all returned checks.

Buggs Island Team Tournaments reserves the right to refuse any tournament entry. Having read the rules of Buggs Island Team Tournaments, and signed this application, I agree to waive and release Buggs Island Team Tournaments of all claims of personal injury and property damage incurred by me while participating in this tournament. I also agree to take a polygraph/stress test if requested.

Signature _____ Date _____

Signature _____ Date _____