

MINNESOTA STATE B.A.S.S. FEDERATION
2009 STATE TOURNAMENT OF CHAMPIONS
OFFICIAL ENTRY FORM
(PLEASE PRINT CLEARLY)

B.A.S.S. Membership # _____ Exp. Date: _____
B.A.S.S. Insurance NATL FED # _____ Exp. Date: 12/31/09
(The # on the Insurance card is usually the same as your B.A.S.S. membership number)

Member Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone Number: (____) _____ - _____ Work Phone: (____) _____ - _____

I am a member in good standing of the _____ B.A.S.S. Club.

Do you have any physical impairment? Yes ____ No ____

If yes, please explain: _____

Will you bring a boat and motor? Yes _____ No _____

If yes, give exact maximum Coast Guard horsepower rating for your boat: _____

Horsepower of your motor: _____ Boat Registration Number _____

Are you fishing: Team: _____ Individual: _____ Alternate: _____

Are you a Designated: Guaranteed Boater: _____ Boater: _____ Non-Boater: _____

Please attach a copy of your **CURRENT liability insurance coverage**. (The page, which shows the **dates** of coverage as well as the **amount** of coverage) **New this year you must have a minimum of \$300,000 Liability.**

I certify that I have reviewed and understand the tournament rules. In signing this entry form, I agree to abide by these rules. I hereby waive and release all other contestants, hosts, sponsors, and tournament officials from all claims of injury and/or damage incurred in connection with this tournament. Furthermore, I certify that I have liability insurance on the boat I intend to use in this tournament (a copy of my policy cover page is attached). I am a member in good standing of the Bass Anglers Sportsmen Society and the Minnesota State B.A.S.S. Federation.

(READ BEFORE SIGNING)

Signature _____

Date _____