WSCONSING BASS FEDERATION JUNIOR TOURNAMENT ENTRY FORM

Club Name:		
Address:		
	Email:	
Date of Birth:	Age as of Aug 1:	
□ BOATER □ CO-ANGLER	Boat Registration No.	
Boat Owner:		
lected tournament. In signing this applic and regulations. I expressly assume all ri FLW and all sponsors and tournament of this tournament. I further understand an	, I have completed this application and submit it for my ent ation, I hereby agree to be bound by and comply with all To sks associated with the Tournament and hereby release th ficials from all claims of injury and/or damage incurred in o ad agree that the Tournament Committee reserves the righ y a member in good standing with the W.B.F.	ournament rules e W.B.F., TBF, connection with
Youth Signature:	Date:	
Parent Signature:	Date:	

Emergency Contact: Names/ Cell phones:

