

12th ANNUAL FLORIDA CATFISH CLASSIC 2010
FRIDAY, SEPTEMBER 24TH & SEPTEMBER 25TH, 2010
REGISTRATION FORM

PLEASE PRINT

NAME _____ Sr. Jr. III LAUNCH FROM _____
(LAST) (FIRST) (M) (Circle one)

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ CELL PHONE _____

E-MAIL ADDRESS _____

Having acquainted myself with the rules, I have completed this application and am enclosing my entry fee of **\$50.00** if paid **before Sept. 24, 2010** or **\$55.00** if paid on or **after Sept 24, 2010** (\$20.00 for children fishing in the Kid's Channel Catfish Classic; they must be accompanied by a registered adult at all times and must wear life jackets) payable to **Florida Catfish Classic**. In signing this application, I hereby release all other contestants, the host sponsors and tournament officials from all claims or injury and/or damage incurred in connection with this tournament. I further understand and agree that the Tournament Committee reserves the right to refund this entry fee, if they choose, for any reason, not to accept my application. I grant permission to the Tournament Committee to use any photos taken of me during the tournament along with my name.

I agree to abide by any and all tournament rules, regulations, and laws and conduct myself in high standards while involved in the tournament. I understand that violations will result in my expulsion from this tournament. By executing this document, I consent to the **Employees Club of the City of Wewahitchka** having sole and complete discretion as to what constitutes a violation and agree that the judgment of **Employees Club of the City of Wewahitchka** is binding and final. I swear that the facts listed herein are true and accurate to the best of my knowledge.

(Adult) Fisherman's Signature _____ Date _____

Adult Age Range: check one
15-25 _____ 26-35 _____ 36-45 _____ 46-55 _____ 56-65 _____ 66-75 _____ 76 & up _____

If fishing in Kid's Classic (CHANNEL CATFISH ONLY):

Please list child's age _____ and name of adult that child will be fishing with _____
(Print Adult Name)

Child's Birthday: _____

PLEASE MAIL THIS REGISTRATION FORM WITH YOUR ENTRY FEE OF **\$50.00 IF PAID BEFORE Sept 24, 2010 and POSTMARKED BY Sept. 21, 2010 OR \$55.00 IF PAID ON OR AFTER Sept. 24, 2010** (\$20.00 FOR KID'S CLASSIC) TO **EMPLOYEES CLUB OF THE CITY OF WEWAHITCHKA, PO BOX 966, WEWAHITCHKA, FL 32465** OR SUBMIT IT THE DAY OF THE TOURNAMENT. YOU CAN ALSO BRING IT BY WEWAHITCHKA CITY HALL AT 109 S. 2ND ST.

For use by Tournament Officials Only:		PAID BY:	CASH	OR	CHECK # _____
Flathead Weight	Channel Weight	Amt paid \$ _____	FISHERMAN # _____		
			BOAT # _____		