Sioux Narrows Bassin' For Bucks 2024 September 6th,7th, 8th, 2024

Entry Form

		Elluyi	COIII				
Captain	AGE						
Mailing Address							
Town/City		Province	Province/State		Postal/Zip Code		
Telephone Number			Email Address				
Partner			AGE				
Mailing Address							
Town/City		Province	/State		Postal/Zip Code		
Telephone Number			Email A	ddress			
	100 PLUS ? Yes N	lo	Youth A	\ge*	Lund? Yes No		
*Age at tournament w	veekend, for purposes of	100 years	combin	ed age category			
		Spons	sors				
	Your Comments	and/or Su	ggestion	ns are appreciate	ed		
	1						
	,						
	Make Cheque or Mone	y Order for 50 "Bassin' Fo			e to:		
		forward all e	ntry fees/	bassin@hotmail.com forms to:	ı		
	P.O. Box 5	Bassin' Fo 06, Sioux Nar		ario P0X 1N0			
	siouxnarrowsbassin@hotma	ail.com or 80)7-466-2	2578 or 807-466	5-8180.		
	ENTRIES WILL BE	LIMITED TO	THE FIR	ST 120 PAID TEAMS			
enclose my Entry Fee payable	GEMENT: Having acquainted myse to 'Bassin' for Bucks'. By signing nission for the free use of my name	this Entry Fo	rm I accep	tthe Rules and Regula	ations as set forth herein and		
	ASE & INDEMNIFICATION AGRI						

WAIVER OF CLAIM RELEASE & INDEMNIFICATION AGREEMENT in consideration of the acceptance of my entry in the 'Bassin' for Bucks', its promoters, employees, sponsors, organizers, hosis, directors, officers, and all other organizers and affiliated organizations, agencies and/or agents and assigns and any other person assisting in this event from any claims for damages or injuries suffered by me as a result of my participation in or travelling to or from this event. I hereby state that I am in proper physical condition to participate in this event and am aware that participation could, in some circumstances, result in physical injury. I further agree to indemnify 'Bassin' for Bucks', et. al. (mentioned above), from any claims or demands arising out of or in consequence of the participation or attendance by me in this event. Important: If under the age of eighteen (18) this waiver of claim, release and indemnification agreement must be signed by a Parent or Legal Guardian.

of or in consequence of the participation or and indemnification agreement must be	•	. Important: If under the age of eighteen (18) to Guardian.	his waiver of claim, release
Captain's Signature:		Partner's Signature:	
Parent or Legal Guardlan's Signature:			(See above)
Dated this	day of		, 20