

39TH ANNUAL BIG STONE WALLEYE CLASSIC TOURNAMENT

BIG STONE WALLEYE CLASSIC REGISTRATION FORM AND LIABILITY WAIVER

PO BOX 348, MILBANK, SD 57252

SATURDAY, JUNE 15, 2019 FROM 7AM-4:15PM

(MAKE CHECKS PAYABLE TO BSWC)

ANGLER #1

NAME: _____

ADDRESS: _____ STATE _____ ZIP _____

EMAIL: _____

PHONE # _____

SHIRT SIZE MENS (Please circle one) XS S M L XL XXL XXXL XXXXL - \$15.00 each at the time of Pick-up.

ANGLER #2

NAME: _____

ADDRESS: _____ STATE _____ ZIP _____

EMAIL: _____

PHONE # _____

SHIRT SIZE MENS (Please circle one) XS S M L XL XXL XXXL XXXXL - \$15.00 each at the time of Pick-up.

WAIVER OF LIABILITY

In addition to tournament rules and regulations, we agree to abide by the following:

By my signature below, on behalf of myself, my heirs, next of kin, successors in interest, assigns, personal representatives and agents, I hereby:

1. Waive any claim or cause of action against and release from liability the State of South Dakota, its officers, employees and agents for any liability for injuries to my person or property results from my participation in the activity listed above;
2. Agree to indemnify and hold harmless the State of South Dakota, its officers, employees and agents for any claims, causes of action or liability to any other person arising from my participation in the activity listed above; and
3. Consent to receive any medical treatment deemed advisable during my participation in the activity listed above.

I have read this release and waiver of liability, assumption of the risk and indemnity agreement and consent to medical treatment, fully understand its terms, understand that I have given up substantial rights by signing it, and have signed it freely and voluntarily without any inducement, assurance, or guarantee being made to me and intend my signature to be complete and unconditional release of all liability to the greatest extent allowed by law.

Angler #1 Signature _____

Date Signed _____ Age _____ DOB _____

Parent/Guardian Signature _____
(if under 18 years of Age)

Angler #2 Signature _____

Date Signed _____ Age _____ DOB _____

Parent/Guardian Signature _____
(if under 18 years of Age)

-----Tournament Official Use Only-----

Date Registered by Mail _____ Check # _____ Team # _____