



# Thermal Belt BassMasters

## Membership Application

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Nick Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Sex:  Male  Female

Physical Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address:  *Check if mailing address and physical address are same*

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Telephone Number: \_\_\_\_\_ Cellular Telephone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Will you be fishing as a:  Boater  Non-Boater  Undecided / Both

Boat Information *(if applicable)*:

Boat Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Motor Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model/HP: \_\_\_\_\_

Boat Insurance Carrier: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Primary Number for Emergency Contact: \_\_\_\_\_

Secondary Number for Emergency Contact: \_\_\_\_\_

# Release of Liability

## \*\* Read before Signing \*\*

By signing this document, the undersigned acknowledge, appreciate, and agree that all club sponsored events, including but not limited to tournaments, carry the significant risk of injury from the activities involved, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist and you KNOWINGLY AND FREELY ASSUME ALL SUCH RISK, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE THERMAL BELT BASSMASTERS BASS CLUB, or other participants, and assume full responsibility for your participation.

You and on behalf of your heirs, assigns, personal representatives and next of kin agree to HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS the THERMAL BELT BASSMASTERS, any of its representatives, officers, or board of directors, sponsoring agents, sponsors, advertisers, or other participants, with respect to ANY AND ALL INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGE TO PERSONAL PROPERTY, including but not limited to court cost and attorney fees, suffered or incurred while attending any club sponsored function.

You also agree to abide by the rules and by-laws set forth by the THERMAL BELT BASSMASTERS. If, however, you observe any unusual significant hazard during your presence or participation, you will remove yourself from participation and bring such to the attention of a THERMAL BELT BASSMASTERS official immediately. In agreement to these terms, you accept membership. Dues are to be paid upon signing this document and are non-refundable after TBF and FLW dues are paid.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

**Print Full Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date Signed:** \_\_\_\_\_

## **FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE** *(UNDER AGE 18 AT TIME OF REGISTRATION)*

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the THERMAL BELT BASSMASTERS and Releasees, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the THERMAL BELT BASSMASTERS and Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE THERMAL BELT BASSMASTERS and RELEASEES, to the fullest extent permitted by law.

**Print Parent/Guardian's Full Name:** \_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_

**Date Signed:** \_\_\_\_\_

**Initial and Date:** \_\_\_\_\_