

SSBM

South Shore Bassmasters

PO Box 239, Brooklyn, NS B0J 1H0

TOURNAMENT ENTRY FORM

Please Complete In Full.

Tournament Location: _____

Team Member # 1: _____

Team Member # 2: _____

SSBM Member Team \$50.00* Non SSBM Member Team \$60.00*

*Includes \$10.00 Lunker Pool

check here if member #2 is a substitution check here if this is a one person team entry

Total Fee Paid: _____



The entrant(s) waives for themselves , or any family member for whom they are entering, the responsibility of SSBM, its members and directors for any loss, damage or injury that results directly or indirectly from tournament participation and whether caused by negligence or otherwise. Both members are required to have signed a waiver / release form for SSBM records previously.

SIGNED: _____ (on behalf of both members)

DATE: _____