WOHALI BASS CLASSIC ENTRY FORM

Captain - Please Print	S.S.# for Payout Checks			
Address	City	State	Zip Code	
Cell Phone	Email Addr	ess		
Boat Brand / Year	Engine Bra	nd / Year		
Partner - Please Print	S.S.# fo	r Payout Checks		
Address	City	State	Zip Code	
Cell Phone	Email Addı	ress		

WAIVER AND RELEASE

Entry Fee: \$200

Mail completed entry form and check to: Wohali Outdoors 2456 W. New Orleans St Broken Arrow, Ok 74011

Bring payment to Check-in/Registration on Oct. 13th Make checks payable to Wohali Outdoors.

By entering this tournament, I have read and agree to be bound by the Wohali Bass Classic Rules. I hereby release and hold harmless all other contestants, sponsors, and tournament officials from all claims for personal injuries, lost or stolen property and/or damages incurred in connection with my participation in the Wohali Bass Classic. I acknowledge that my personal safety and the safety of my property are my sole responsibility. I am aware that risks and dangerous conditions are associated with boating and participation in fishing tournaments and I release all aforementioned persons from any duty to warn me of the existence of such risks or conditions.

I understand and agree that the Wohali Bass Classic reserves the right to refuse my entry and refund my fee for any reason. I understand and agree that the Wohali Bass Classic reserves the right to not allow my continued participation in the Wohali Bass Classic for any reason.

I agree and consent to undergo a polygraph test, if requested, and if the test reveals any untruthfulness or violation of the rules, I understand that this will result in my forfeiting all fees and awards from the event entered and will preclude participation in any future Wohali Bass Classic events. I understand that refusal to submit to the polygraph test will result in an automatic disqualification. I grant the Wohali Bass Classic and its sponsors the rights to any photographic image taken during my participation in the tournament. I have read and understand the above

By signing below , we acknowledge that we have read and understand ths WAIVER and RULES for these events and agree to abide by both.

Captain - Signature	Date Signed
Partner / Guardian of Minor Angler - Signature	Date Signed

Phone: (918) 527-6419

Email: mccoybasstournaments@hotmail.com

Tournament Director: David McCoy



Boat Number

Staff Only		
Date:		
Flight #	<u> </u>	
Payme	nt Type:	
☐ Cash	1	
☐ Chec	ck No	
☐ Mon	ey Order	
Amour	nt:	
Staff In	itial:	