



SIGNATURE OF CAPTAIN:

Catch & Release Team Tournament July 6th & 7th, 2024



## www.kenorawalleyeopen.com

Captain Information			Payment Information	
Last Name:	First Name:		Entry Fee: \$600 per boat	
Email Address:		Home Number:	5000 per boat	
Mailing Address:		Cell Number:	Please check form of payment	
City State/Province:	Postal/Zip Code	Fax Number:	CashCheque	
			e-Transfer	
Partner Information			Credit Card	
Last Name:	First Name:		-Must Phone in Credit Card # -Card Subject to 5% Processing Fee -Cheques Payable to JP Kennedy -Send e-Transfer to	
Email Address:		Home Number:	jpkennedy26@gmail.com	
		( )	Send Payment to:	
Mailing Address:		Cell Number:	JP Kennedy 963 Mission Street	
City State/Province:	Postal/Zip Code	Fax Number:	Winnipeg, MB R2J 0A4	
Boat Brand/Type:		•		

I have read and am familiar with the rules as stated. I am signing this application and hereby waive and release all contestants, sponsors and tournament officials from claim, injury or damage in connection with this tournament. All statements made herein are true to the best of my knowledge.

SIGNATURE OF PARTNER: \_