Solo Pro Tournament Series 2015 Entry Form

Receipt date of entry determines starting position. Check, credit card, or money order must accompany this form to qualify for tournament entry. In signing this application, I verify that I have boating liability insurance in the amount of \$100,000. By my signature, I have read and understand the rules and the agreement provided by Solo Pro Tournament Series. Entry forms that are not completed in full will not be accepted.

Solo Pro Tournament Series: Annual membership fee is \$35.00 and will apply towards all Solo Pro Tournaments. Entry fee is \$160.00 per tournament, which includes Big Bass. You may include a \$20 deposit per tournament to reserve your boat number. Membership fee must be paid before fishing any tournament event. Reservation money will not be refunded unless the tournament is officially canceled. Boat position will transfer forward in the event of a rescheduled tournament.

The undersigned acknowledge that there is a significant risk of injury from the activities involved in the Tournament including the potential for permanent injury and death. The undersigned agree that they are knowingly and freely assuming all risks of participation in the Tournament and assume full responsibility for their participation in the Tournament. THE UNDERSIGNED BY AND FOR THEMSELVES AND THEIR HEIRS, PERSONAL REPRESENTATIVES AND NEXT OF KIN DO HEREBY RELEASE FROM ANY AND ALL LIABILITY SOLO PRO TOURNAMENT SERIES, ITS OFFICERS, OFFICIALS, EMPLOYEES, AND ALL OTHER PARTICIPANTS IN THE TOURNAMENT, ALL SPONSORING AGENCIES, SPONSORS, ADVERTISERS, AND IF APPLICABLE, THE OWNERS AND LESSORS OF THE PREMISES USED TO CONDUCT THE TOURNAMENT (COLLECTIVELY THE "RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, LOSS OR DAMAGE TO PERSONAL PROPERTY INCURRED BY THE UNDERSIGNED AS A RESULT OF PARTICIPATION IN THE TOURNAMENT WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. FURTHER, THE UNDERSIGNED AGREES TO HOLD HARMLESS AND INDEMNIFY ALL RELEASEES FROM ANY AND ALL LOSS, COST DAMAGE OR EXPENSE, INCLUDING REASONABLE ATTORNEY'S FEES ARISING OUT OF THE UNDERSIGNED'S PARTICIPATION IN THE TOURNAMENT.

Boater Name: Address: City:		Boat Mfr: Boat Model:			
			State:Zip:		Outboard Year:
			Phone:		Outboard Mfr:
SS#:					
Email Address:					
Sponsors:					
Boater Signature:					
Please specify below which tou	ırnament lake(s) and date(s) you are entering.			
Tournament Lake:	Date:	Amount:			
Tournament Lake:	Date:	Amount:			
Tournament Lake:	Date:	Amount:			
Tournament Lake:	Date:	Amount:			
Tournament Lake:	Date:	Amount:			
Tournament Lake:	Date:	Amount:			
Make checks payable to:					
Solo Pro Tournament Series	Credit Card Number:				
3511 W. Marwin Ave.	3 digit number on back of card:				
Springfield, MO 65803	Name on card:				
Amount Enclosed: \$	Expiration date:	:Zip Code:			
Signature:					

By contestant(s) signature on entry form and /or participation in these tournaments, the contestant(s) agree to any quality assurance tests if required by the Tournament Director. They may include all or part of the following: CVSA, Polygraph test, Urinalysis, or Blood test. Refusal of an angler to submit to a test or failure of a test will result in loss of winnings, immediate disqualification, plus subsequent disqualification from future tournaments.