

2017 NUCA of SWFL Annual Fishing Tournament

SEP. 15th & 16th

'TWEEN WATERS INN

CAPTIVA ISLAND, FL

Tournament Registration Form

ALL ANGLERS, JR. ANGLERS, GUESTS, & CHILDREN MUST BE REGISTERED IN ADVANCE

Angler Registration

List Names

(List Calcutta Information on Separate Registration Form)

Charge \$180.00 Each Total Anglers: _____

Jr. Angler Registration

Must Be 14 Years Old or Younger
(Jr. Anglers Are Eligible For the Calcutta)

Charge \$50.00 Each Total Jr. Anglers: _____

Guest Registration

List Names
(Other Than Anglers)

Charge \$110.00 Each Total Guests: _____

Child Registration

List Names
(Other Than Jr. Anglers)

Charge \$25.00 Each Total Children: _____

Total Anglers X \$180 each	= \$	_____
Total Jr. Anglers X \$50 each	= \$	_____
Total Guests X \$110 each	= \$	_____
Total Children X \$25 each	= \$	_____
Total Calcutta X \$50 each	= \$	_____
(Total from Calcutta Form)		

Grand Total = \$ _____ Check # _____

Company: _____

Contact: _____

Phone #: _____

Fax #: _____

Single night registration for Friday, Sep. 15th or Saturday, Sep. 16th is available upon request for \$75.00 per night. Registration form must be received in advance to guarantee reservations by September 12, 2017. Please send completed form to Rhonda Cason at NUCASWFL@gmail.com or 239-790-1369 (fax). If paying by check, please make payable to NUCA of SWFL and send to Rhonda Cason; P.O. Box 62207 Fort Myers, FL 33906. If any additional information is needed please contact Chris Stewart at 239-633-2553 or Rhonda Cason at 239-939-1952. Thank you and look forward to seeing you there!

PARTICIPANTS IN THE NUCA OF SWFL ANNUAL FISHING TOURNAMENT ENTER AT THEIR OWN RISK. OFFICIALS, COMMITTEE MEMBERS, 'TWEEN WATERS INN PERSONNEL, AND ALL PERSONS CONNECTED DIRECTLY OR INDIRECTLY WITH NUCA OF SWFL, SHALL BE EXEMPT FROM ANY LIABILITY FOR LOSS, DAMAGE, NEGLIGENCE, HARM OR INJURY SUFFERED BY ANY PARTICIPANT, ENTRANT, SPORT FISHERMAN, THEIR COMPANIONS, BOAT CAPTAINS, AND CREW MEMBERS, VESSELS AND EQUIPMENT, WHICH MAY OCCUR DURING THIS TOURNAMENT.

NAME OF APPLICANT _____ SIGNATURE _____