



WOMEN'S BASSMASTER TOUR

2008 Official Entry Form

(Please Print)

MEMBERSHIP # _____

LAST NAME _____, FIRST NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

E-MAIL ADDRESS _____

SSN _____ BIRTHDATE _____

BASS FEDERATION MEMBER? YES _____ MEMBER # _____

DAYTIME PHONE _____ EVENING PHONE _____

CELL PHONE _____

TRUCK BRAND _____

BOAT BRAND _____ H.P. RATING _____

OUTBOARD BRAND _____ H.P. _____

DIVISION _____

Tournament(s) and Date:

1. _____

2. _____

3. _____

4. _____

PRO

[] Tournaments 1 thru 4 X \$650 per tournament \$ _____

CO-ANGLER

[] Tournaments 1 thru 4 X \$350 per tournament \$ _____

BASS MEMBERSHIP DUES: You must be a current member of BASS to participate. If not, check below and enclose the proper amount.

BASS Membership: \$25.00 – 1 Yr., \$39.00 – 2 Yrs., \$55.00 – 3 Yrs. \$ _____

BASS PASS: \$25.00 \$ _____

Enter at www.bassmaster.com

PAYMENT TYPE: CHECK _____ VISA _____ MASTERCARD _____ AMEX _____

ACCOUNT# _____ EXP. _____

SIGNATURE _____

Total Amount Enclosed or to be charged: \$ _____

Make checks payable & mail to:

Women's Bassmaster Tour
P.O. Box 10000
Lake Buena Vista, FL 32830

Phone: 407-566-BASS (2277)

Photocopies Accepted

**PARTICIPANT RELEASE OF LIABILITY — SIGNATURE REQUIRED
READ BEFORE SIGNING**

In consideration of being allowed to participate in the Women's Bassmaster Tour fishing tournament series for 2008, I acknowledge and agree that:

1. The risk of injury, disability, death, loss or damage to person or property from the activities involved in the tournament(s) is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist;

2. If I am using my own boat in the tournament(s), I certify that I now have or will obtain prior to the tournament series, Boat Owners Liability Insurance (including coverage for third party property damage and bodily injury) with no Tournament exclusion, having a minimum limit of at least \$300,000.00 per occurrence. The insurance must be issued by a reputable insurer rated A or better by A.M. Best and Co. I certify that my boating liability insurance policy has been endorsed to name BASS, LLC., its parent and affiliated companies, its licensees, and affiliates, their advertising agencies, and all of their respective officers, directors, agents, employees, and stockholders, as an additional insured and/or an additional interest. At BASS' request, I will provide it with satisfactory evidence of that insurance.

3. I have been advised by BASS, and have had the opportunity to seek legal counsel with respect to the legal effect of this document; and,

4. I KNOWINGLY AND FREELY ASSUME ALL RISKS REFERRED TO ABOVE, BOTH KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES (AS DEFINED BELOW) OR OTHERS, AND ASSUME FULL RESPONSIBILITY FOR RISKS ARISING FROM MY PARTICIPATION IN THE TOURNAMENTS;

5. I willingly agree to comply with the terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,

6. I, FOR MYSELF AND ON BEHALF OF MY HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS BASS, LLC, INC., ITS PARENT AND AFFILIATED COMPANIES, THE OFFICERS, OFFICIALS, DIRECTORS, SHAREHOLDERS, AGENTS, AND/OR EMPLOYEES OF EACH, OTHER PARTICIPANTS, AND SPONSORING AGENCIES, SPONSORS, ADVERTISERS, AND, IF APPLICABLE, OWNERS AND LESSORS OF PREMISES AND PROPERTY USED TO CONDUCT THE EVENT ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGE TO PERSON OR PROPERTY, WHICH I SUFFER OR WHICH I AM FOUND TO HAVE CAUSED IN WHOLE OR IN PART BY MY NEGLIGENCE OR INTENTIONAL MISCONDUCT, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES, OR OTHERWISE, TO THE FULLEST EXTENT PERMITTED BY LAW.

7. If there are any questions raised by the judges or officials of BASS as to my veracity in respect to my participation in any tournament, I agree to submit to a polygraph examination and understand that failure to pass the examination will result in disqualification.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT AND THE ATTACHED RULES, FULLY UNDERSTAND THEIR TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY.

8. PUBLICITY. In consideration for permission to participate in the Tournament, I ("Contestant") hereby grant to BASS, LLC, its assignees and/or licensees (including television production companies contracted by BASS), the unconditional right to use my name, voice, photographic likeness, biographical information, fishing tips and/or instructions in any medium whatsoever, including but not limited to video/audio productions, merchandising, promotions, articles, and/or press releases, in connection with BASS and/or the ESPN Outdoors Bassmaster Series, without restriction as to changes or alterations from time to time. I understand that I will not be entitled to receive any royalties or other compensation in connection with such use and waive my right to review the finished product.

By my signature below I verify that I have read and understand the foregoing provisions.

PARTICIPANT'S SIGNATURE _____

Age _____ Date _____

PRINT CONTESTANT NAME HERE _____

FOR PARENTS/GUARDIANS OF MINORITY AGE PARTICIPANTS (UNDER AGE 18 AT TIME OF REGISTRATION)

I, AS PARENT/GUARDIAN DO HEREBY CERTIFY THAT I HAVE LEGAL RESPONSIBILITY FOR THE PARTICIPANT AND I AGREE AND CONSENT TO HIS/HER RELEASE AS

PROVIDED ABOVE OF ALL THE RELEASEES, AND, FOR MYSELF, MY HEIRS, ASSIGNS, AND NEXT OF KIN, I RELEASE AND AGREE TO INDEMNIFY AND HOLD HARMLESS THE RELEASEES FROM ANY AND ALL LIABILITIES INCIDENT TO MY MINOR CHILD'S OR WARD'S INVOLVEMENT OR PARTICIPATION IN THESE PROGRAMS AS PROVIDED ABOVE, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, TO THE FULLEST EXTENT PERMITTED BY LAW.

PARENT'S/GUARDIAN'S SIGNATURE _____

Date _____

EMERGENCY PHONE NUMBER(S) _____