





**Amount Paid** 

## HTTP: // www. anglers-dream. com**Division 8**

4. We signify by our signatures above that we have read and understood the agreements numbered 1, 2, and 3 above.

## Worster Lake - Potato Creek West Ramp - North Liberty, IN Director:

## Stan Zatorski 219-512-6581 anglersdream1@hotmail.com

Regular Membership \$30 per Member ( ) or \$60 per Team ( )

April 11	\$120()	May 9	\$120()
June 13	\$120()	July 11	\$120()
Aug. 15	\$120()	Sept. 5	\$120()

September 19 (Divisional Championship) \$120 ()

## Methods of Payment:

On Site Day of Event: Cash Only ()

Must be received 7 days prior to event: By Mail: Check ( ) Money Order ( ) Return Check Charge \$40.

Make check or money order payable to: Anglers Dream

Send To: PO Box 1201 Hammond IN 46325 (219-) 512-6581

NAMEPlease Print	NAMEPlease Print		
ADDRESSPhone	ADDRESSPhone		
CITY,	CITY,		
STATEZip	STATE Zip		
EMAIL	EMAIL		
SIGNATURE	SIGNATURE		
Check all that apply! Regular ( ) Substitute ( ) Nomad ( )	<u>Check all that apply!</u> Regular ( ) Substitute ( ) Nomad ( )		
LIABILITY RELEASE: In signing this agreement, we hereby release Anglers Dream L ost or expenses relating to injury of any persons or any property which we may sustain or . VERIFICATION OF LIABILITY INSURANCE: We further state that we maintain curren . We signify by our signatures above that we have read and understood the agreements numb	which we may cause by reason of participating in or in connection with this tournament. I liability insurance on the boat we will use in these events. ered 1, 2, and 3 above.		
	ut Here >		
RIGLER S	April 11 \$120 ( ) May 9 \$120 ( ) June 13 \$120 ( ) July 11 \$120 ( ) Aug. 15 \$120 ( ) Sept. 5 \$120 ( )		
Team Number Amount Paid	September 19 (Divisional Championship) \$120 ( )		
HTTP://www.anglers-dream.com Division 8	Methods of Payment:		
Worster Lake - Potato Creek West Ramp - North Liberty, IN	On Site Day of Event: Cash Only ( )  By Mail: Must be received 7 days prior to event: Check ( ) Money Order ( ) Return Check Charge \$40.		
Director: Stan Zatorski 219-512-6581			
anglersdream1@hotmail.com Regular Membership \$30 per Member() or \$60 per Team () Nomads Membership \$40 per Member() or \$80 per Team ()	Make check or money order payable to: Anglers Dream Send To: PO Box 1201, Hammond, IN 46325 (219-) 512-6581		
NAMEPlease Print	NAMEPlease Print		
	Please Print		
ADDRESS Phone	ADDRESSPhone		
CITY,	CITY,		
STATEZip	STATEZip		
EMAIL_	EMAIL		
SIGNATURE	SIGNATURE		
Check all that apply! Regular ( ) Substitute ( ) Nomad ( )	<u>Check all that apply!</u> Regular ( ) Substitute ( ) Nomad (		
	LLC., their agents, employees and sponsors from any and all damages, claims, demands, or which we may cause by reason of participating in or in connection with this tournamen		

Total Weight