

FireFly Weeknight Series Division ENTRY FORM

Membership Per Angler (+ \$2.50 pro-	Entry Fee Per Team Division Entry Fee \$40	
cessing fee) Individual \$40	C40	
	\$40	
Family \$60	Total Enclosed \$	
Individual Membership is Family membership is go	s valid for one person and god for all series for the fam	good for all Series. nily in the household.
Insurance Company:		#
Membership ID #		
Name (Partner 1)		
Address		
City		
Social Security #	Date of	Birth
Cell #	E-Mail	
Please check if you: Fa		
Membership ID #		
Name (Partner 2)		
Address		
City		
Social Security #	Date of	Birth
Cell #	E-Mail	
Please check if you: Fa	cebook Text	
FOM TEAM ID #		
TOURNAMENT LOCATI	ON	
TOURNAMENT LOCATI	ON	DATE
TOURNAMENT LOCATI	ON	DATE
TOURNAMENT LOCATI	ON	DATE
TOURNAMENT LOCATI	ON	_DATE
sponsors, or anyone working with the participation in this event, whether a of the law, we also give permission f	te trail for any damages, injuries, or arising from negligence of said relect for our quotes, pictures, or videos be ensation, and acknowledge that we	uses or otherwise to the fullest extent earing our likeness to be used in have read and understand the tourna-
PARTNER 1		
PARTNER 2		
GUARDIAN (IF REQU	/IRED)	