

CLYDE'S PLACE 29th ANNUAL SALMON TOURNAMENT

SATURDAY JULY 27, 2024

Name of Boat _____

Brand Name: _____

Dominate Color: _____

Registration: _____

Captains Name _____

Address: _____

Phone () _____

Crew _____

Waiver: We the undersigned, hereby release Clyde's Place, its owners, other contestants and tournament officials and any promoters from any claim on injury/ or damage incurred in connection with this tournament. I agree to comply with the same. (All crew members must sign before entering)

Signature/Date: _____

Signature/Date: _____

Signature/Date: _____

Signature/Date: _____

Signature/Date: _____