PSWSFA Sheepshead Tournament

Boat Entry Form

Team Name _____

Sponsor (if Applicable) _____

Address _____ City _____ State _____ Zip _____

E-Mail Address _____ Phone _____

Captains Name	1. _____	Entry Fee:	_____
Angler	2. _____	Additional Anglers:	_____
Angler	3. _____	Calcutta:	_____
Angler	4. _____	**TOTAL:**	_____

Additional Anglers: 5. _____
($50.00 ea.) 6. _____

Preferred Weigh-In Location (check one):

__ **Wallaces Bait & Tackle** - Hampton

__ **Long Bay Point Bait & Tackle** – VA Beach

__ **G-Town Bait & Tackle** - Gloucester

Make checks payable to: PSWSFA C/O David Brabrand PO Box 1056 Yorktown, VA 23692-2870

I understand that I, as Captain/boat owner/crew member, am responsible for my boat and its occupants and their safety at all times. I and my crew have read and understand all the Rules and Regulations, agree to abide by them, and hereby fully release the PSWSFA from any and all liability arising from the tournament and my crew's participation in the tournament and understand I am solely responsible for the decisions as to when, where, and how my boat is fished and otherwise participates in the event.

Captains Signature _____