

MORRISTOWN MARINE TEAM TRAIL OFFICAL ENTRY FORM

LAKE _____
DATE _____
BOATER'S NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE () _____
SOCIAL SECURITY NUMBER _____

PARTNER'S NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE () _____
SOCIAL SECURITY NUMBER _____

ALTERNATE'S NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE () _____
SOCIAL SECURITY NUMBER _____

LIABILITY RELEASE

In signing this application, I hereby release the host, Morristown Marine Team Trail, it's owners, employees, sponsors, and tournament officials from any and all damages, claims, demands, cost or expenses relating to injury of any persons or damage to any property which I sustain or which I may cause by reason of participating in or in connection with this Morristown Marine Team Trail tournament.

I further agree that I will never sue any of the above for damages on account of any injury I suffer or cause, whether known now or which may develop in the future, in connection with the Morristown Marine Team Trail tournament. In the event any of the above are sued because of my actions, I expressly agree to indemnify and hold each harmless from any liability whatsoever, including court cost and attorney fees arising with respect to such actions.

I further understand and agree that the tournament committee reserves the right to refund this entry fee if it shall choose, for any reason except my application as a qualified entrant. I further agree to submit to a polygraph examination and abide by the rules committee of the polygraph test.

BOATER'S NAME _____
DATE _____
PARTNER'S NAME _____

DATE _____