



TUNA & SWORDFISH CHALLENGE

PLEASE PRINT CLEARLY

TEAM REPRESENTATIVE:		
BOAT NAME:	HOME PORT:	
MAKE:	LENGTH:	

TOURNAMENT ENTRY:
Entry Fee is \$2,000 per boat, per species, which covers the Captain, Mate, and four Anglers. Each additional angler is \$500. There will be an Optional Entry that teams may enter at the Captain's Meeting.

CHECK ALL BOXES THAT APPLY

<input type="checkbox"/>	YELLOWFIN TUNA - \$2,000
<input type="checkbox"/>	SWORDFISH - \$2,000

<input type="checkbox"/>	ANGLER #5 - \$500
<input type="checkbox"/>	ANGLER #6 - \$500

PAYMENT INFO

<input type="checkbox"/>	DEPOSIT - \$500 <i>Pay Balance at Captain's Meeting</i>
<input type="checkbox"/>	PAY IN FULL NOW

CAPTAIN:	SHIRT SIZE:
PHONE:	EMAIL:
ADDRESS:	CITY/STATE/ZIP:

MATE:	SHIRT SIZE:
PHONE:	EMAIL:
ADDRESS:	CITY/STATE/ZIP:

ANGLER 1:	SHIRT SIZE:
PHONE:	EMAIL:
ADDRESS:	CITY/STATE/ZIP:

ANGLER 2:	SHIRT SIZE:
PHONE:	EMAIL:
ADDRESS:	CITY/STATE/ZIP:

ANGLER 3:	SHIRT SIZE:
PHONE:	EMAIL:
ADDRESS:	CITY/STATE/ZIP:

ANGLER 4:	SHIRT SIZE:
PHONE:	EMAIL:
ADDRESS:	CITY/STATE/ZIP:

ADDITIONAL ANGLER 5:	SHIRT SIZE:
PHONE:	EMAIL:
ADDRESS:	CITY/STATE/ZIP:

ADDITIONAL ANGLER 6:	SHIRT SIZE:
PHONE:	EMAIL:
ADDRESS:	CITY/STATE/ZIP:

Please mail completed form with your check to:
 Hurricane Hole - Tuna & Swordfish Challenge
 P.O. Box 750 • Broussard, LA 70518
Make checks payable to Hurricane Hole

By signing this entry form on behalf of myself and entire team, I certify that I have read and understand all rules and regulations concerning this tournament. I waive and release all officials and staff of Hurricane Hole Marina and the Tuna & Swordfish Challenge, Volunteers, Sponsors, and all persons connected directly or indirectly with operations of any and all claims of personal injury, death, lost or stolen property, and accidents and/or damages incurred in connection with this tournament. I further agree and understand that the tournament committee reserves the right to terminate and/or refund any entry, if they shall choose, for any reason.

Tournament Contact
 Crystal LaFosse • 337.802.5525

SIGNATURE: _____
 PRINT: _____ DATE: _____