

## Tournament Series Registration Form

<u>PRINT CLEARLY</u> the following information is required to participate in the Pink Fishing Tournament Series at Cedar Creek Lake - October 18, 2025

| Angler 1:  |  |                   | Angler 2:       |  |                       |              |
|--|--|-------------------|-----------------|--|-----------------------|--------------|
| Address:   |  |                   | Address:        |  |                       |              |
| City/State/Zip:  |  |                   | City/State/Zip: |  |                       |              |
| Email:   |  |                   | Email:          |  |                       |              |
| Phone Number:  |  |                   | Phone Number:   |  |                       |              |
|  | Mobile num   | nber will be      | used for        | text alerts only                         |                       |              |
| Boat Brand:  |  |                   | Motor Brand:    |  |                       |              |
| Cedar Creek Lake - \$225.<br>(Team or Individual)  | 00 per boat  |                   |                 | al - \$235.00 (Pfsal<br>n or Individual) | es2@gmail.con         | n)           |
| Total Amount Paid: \$  | CASH   | СНЕ               | CK              | CREDIT CARD                              | PAYPAL                | VENMO        |
|  | PART OF THE PART O |                   |                 |  |                       |              |
| By my signature on this form, I certi<br>of the Pink Fishing Inc Tournament of<br>this tournament. Also, by signing th | of any and all claims of perso   | onal injury, lost | or stolen p     | property, and accidents ar               | nd/or damages incurre |              |
| Signature/Date   |  |                   |                 |  |                       |              |
| Signature/Date   |  |                   |                 |  |                       |              |
| Signature of parent or guardi  | an if under 18 yrs. old/   | Date              |                 |  |                       |              |
| Send to P.O. Roy 1/45 Conne  | ras Cove. TV 76522   D   | lav Palunfeak     | ac 2 @ am       | ail com   Email form                     | to: OneTyFishinG      | al@gmail.com |