



Xtreme Redfish Series

2011

Team Membership Application

1. Boater (Team Captain) PLEASE PRINT CLEARLY

Name _____

Address _____ City _____

Zip _____ Phone () _____

Email _____

Member Fee- \$35 Per Person

Emergency Contact _____

Phone _____

2. Non-Boater PLEASE PRINT CLEARLY

Name _____

Address _____ City _____

Zip _____ Phone () _____

Email _____

Member Fee- \$35 Per Person

Emergency Contact _____

Phone _____

3. Your Primary Division *Check One*

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Tampa | <input type="checkbox"/> Panama City |
| <input type="checkbox"/> Titusville | <input type="checkbox"/> Crystal River |
| <input type="checkbox"/> Jacksonville | <input type="checkbox"/> Sarasota |
| <input type="checkbox"/> Anclote | |

4. Social Security Info

Boater _____ - _____ - _____

Non-Boater _____ - _____ - _____

5. Liability Release *Please Read and Sign*

A. In signing this agreement, I hereby release Xtreme Fishing Series, its officers, agents, employees and sponsors (herein referred to as Xtreme Fishing Series) from any and all damages, claims, demands, cost or expenses relating to injury of any person(s) or any property, which I may sustain or which I may cause by reason of participating in or in connection with any and all Xtreme Fishing Series events.

B. Covenant not to sue and Waiver of Subrogation: I further agree that I will never sue Xtreme Fishing Series for damages on account of any injury or damage I suffer or cause whether known now or which may develop in the future. In the event Xtreme Fishing Series is sued because of my actions, I expressly agree to indemnify and hold Xtreme Fishing Series harmless from any liability whatsoever, including court cost and attorney's fees, arising with respect to such actions. I understand that in waiving my rights to sue Xtreme Fishing Series I am also waiving my rights of recovery from Xtreme Fishing Series of my Insurance carrier for any claims they may pay on my behalf. I further understand that by signing this agreement I waive any rights my heirs or relatives have or may have to sue Xtreme Fishing Series for liability.

C. Verification of Liability Insurance: I state that I maintain liability insurance on the boat I will use in this or any Xtreme Fishing Series event.

D. Truth Verification: Polygraph or truth verification may be given at any time at the discretion of the officers of Xtreme Fishing Series. Refusal or failure of polygraph or truth verification will automatically eliminate team members' participation from all future Xtreme Fishing Series events.

E. Camera Release: I hereby grant Xtreme Fishing Series the unconditional rights to use my voice, photographic likeness and biographical information and fishing tips and instructions in connection with all Xtreme Fishing Series video/audio production, promotions and/or other compensation in connection with such use.

F. I signify by my signature that I have read, understand and agree to abide by all rules and regulations and decisions set forth by Xtreme Fishing Series tournament officials.

G. Xtreme Fishing reserves the right to refuse membership and/or participation in any event for any reason.

Boater _____ Date _____ Non-Boater _____ Date _____

6. Mail Your Form

Please mail your completed membership form along with a check or money order to: *(Payable to: Xtreme Fishing Series)*

PO Box 2204 • Land O' Lakes • Florida, 34639