| T_{α} 1 | lraaf | ŦΝο | | |
|----------------|-------|---------|--|--|
| 121 | K COL | 1 13(1) | | |

Your Boat Number _____

Springfield Crappie Club Tournament Application

| Where: | LAKE SPRI | NGFIELD SAIL BO | OAT RAMP | | | | |
|---|--|--|----------|---|----------|--|--|
| When: | Saturday, May 5th 2018 Tournament Hours 7:00 - 2:30 | | | | | | |
| Morning Check-in: | 6:30 A.M. Sai | il Boat Ramp | NOTE: F | ree lake passes on tourney day | | | |
| Entry Fee: | \$50 per boat | (no refunds) | | | | | |
| Big Crappie Pot: | \$10 per boat | | | | | | |
| Safety: | A lifejacket n | nust be worn at take | off. | | | | |
| Гаke Off: | Off: Takeoff will be in order that entries are received. | | | | | | |
| Afternoon Check-in: | Sail Boat Rar | Sail Boat Ramp by 2:30 P.M. | | | | | |
| Weigh-in Deadline: | Must be Weig | st be Weigh In Line Before 3:00 P.M. | | | | | |
| Weigh-in: | SEVEN (7) FISH 10 INCH Every boat must check in at the weigh-in line, with or without fish | | | | | | |
| Payoff: | 1st to 4th based on 1 to 14 boats 1st to 9th based on 15 or more boats (Total money received) + \$250.00 | | | | | | |
| Name | | Partner's Nam | ne | | | | |
| Address | | Partner's Add | ress | | | | |
| City | Zip | City | | Zip | | | |
| Phone | | Phone | | | | | |
| Email | | Email | | | | | |
| Signature | | Signature | | | | | |
| In signing this application, I of injury or damage incurre Make checks payable to: Sp | d in connection | with this tournamen | | , and tournament officials from a | ll claim | | |
| Please mail check and appli | cation to: | Springfield Crapp P.O. Box 2574 Springfield, IL 62 | | Tournament Director: Jerry Jallas 217-741-3835 | | | |
| Please mark amount sent: | Entry Fee | | | | | | |
| | Big Crappie_ | | | | | | |
| | Classic Fee | | | | | | |
| | YOU MUST PHYSICALLY FISH 2 TOURNAMENTS TO QUALIFY FOR THE CLASSIC. | | | | | | |
| | 7D 4 1 | | | | | | |