



RECEIPT #: \_\_\_\_\_

**REGISTRATION & LIABILITY FORM  
MALE HEALTH DERBY  
July 28, 2018**

Team Name: \_\_\_\_\_ Engine Brand: \_\_\_\_\_ Horse Power: \_\_\_\_\_

Contact nos. Tel: \_\_\_\_\_ Cell no: \_\_\_\_\_

**Print name of team members you have on board including their signatures:**

1. \_\_\_\_\_ | \_\_\_\_\_ | Email: \_\_\_\_\_ | S M L XL 2XL
2. \_\_\_\_\_ | \_\_\_\_\_ | Email: \_\_\_\_\_ | S M L XL 2XL
3. \_\_\_\_\_ | \_\_\_\_\_ | Email: \_\_\_\_\_ | S M L XL 2XL
4. \_\_\_\_\_ | \_\_\_\_\_ | Email: \_\_\_\_\_ | S M L XL 2XL
5. \_\_\_\_\_ | \_\_\_\_\_ | Email: \_\_\_\_\_ | S M L XL 2XL

Does the boat have the following equipment Radio: \_\_\_\_\_ GPS: \_\_\_\_\_ Flare: \_\_\_\_\_

*NOTE: All boats must check in at Ngardmau Dock for inspection before departure.*

**RELEASE AND WAIVER OF LIABILITY**

I agree to comply with the rules and regulations and event instructions of the Male Health Fishing Tournament in conjunction with Palau Sport Fishing Association.

In consideration to enter and participate in the Male Health Fishing Tournament, I hereby, for attorneys, representatives, and each of them, do release, acquit and hold harmless the Male Health Fishing Tournament Committee, Palau Sport Fishing Association, it's officers, members, volunteers, event agents, sponsors, employees, attorneys and representatives and each of them from any and all claims, demands, losses, causes of action, injuries, damages, penalties, costs, attorneys fees, liabilities and indemnities arising out of my participation in this sports fishing tournament.

I authorize the use of my name, pictures and interviews for use in any broadcast, telecast, advertisement, news paper/ magazine/book publication, film and video production, or any account of this event with no monetary payment or compensation to me.

Captain's Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_