



**2017 Quaker Springs Fire Dept.  
Annual Ice Fishing Tournament  
February 11, 2017  
7:00am-3:00pm  
At The Cove**

Name: \_\_\_\_\_

\_\_\_\_\_ Mailing

Address: \_\_\_\_\_

\_\_\_\_\_ City:

\_\_\_\_\_ State:

\_\_\_\_\_ Zip \_\_\_\_\_ Phone

Number: \_\_\_\_\_

\_\_\_\_\_ Email Address:

\_\_\_\_\_

\_\_\_\_\_ NY Fishing License

Number: \_\_\_\_\_

\_\_\_\_\_ Date of

Birth: \_\_\_\_\_

\_\_\_\_\_ If under Age 18:

\_\_\_\_\_ Parent

Name: \_\_\_\_\_ Parent

Phone Number: \_\_\_\_\_

Early Entry Fee: \$ 20.00 Day Of Tournament: \$20.00

Entry Fee Paid: Cash \_\_\_\_\_ Check

No. \_\_\_\_\_

**Make checks payable to: Quaker Springs Fire Department**

By entering this contest, I acknowledge that I have read and agree to follow and comply with all applicable laws, regulations, and contest rules.

## RELEASE OF CLAIMS

For and in consideration of being allowed to participate in the Quaker Springs Fire Department Ice Fishing Tournament being undertaken at The Cove, State of New York, and further

realizing that I am participating in an activity for which I may be injured, I on behalf of myself, my heirs, and assigns, do hereby release and forever discharge the Quaker Springs Fire Department and it's principals, agents, representatives, and insurance carriers, if any, from any and all rights, claims demands, damages, or causes of action, of any kind, known or unknown, existing or arising in the future, resulting from any participation in the above described activities which injuries and/or death may arise in the future from an accident which may occur in connection with the above activities.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Participant

\_\_\_\_\_  
Signature of Parent or Gaurdian if

*participant is under 18 years of age.*