

# Wheatland Fishing Has No Boundaries

## Anglers Registration Application

El Dorado Lake DEADLINE SEPTEMBER 1st

NAME \_\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_  
STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE ( ) \_\_\_\_\_ VETERAN \_\_\_\_\_  
E-MAIL \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_

DESCRIBE EXACT DISABILITY: \_\_\_\_\_

WHEEL CHAIR OR SCOOTER? YES \_\_\_ NO \_\_\_ MANUAL \_\_\_\_\_ ELECTRIC \_\_\_\_\_

**MEDICATION : (BE SPECIFIC- INFORMATION MANDATORY)**  
\_\_\_\_\_

DO YOU WISH TO FISH FROM; BOAT \_\_\_\_\_ SHORE \_\_\_\_\_

IF YOU INTEND TO BRING YOUR OWN BOAT PLEASE REQUEST BOAT OWNER FORM

ORIGANIZATION (IF ANY) \_\_\_\_\_

NAME OF ATTENDANT FOR ABOVE PARTICIPANT: \_\_\_\_\_

ADDRESS OF ATTENDANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

### **ENTRY FEES: \$25.00 Per Participant**

MAIL REGISTRATION TO: Wheatland FHNB PO BOX 188 Towanda, Kansas 67144

**RELEASE OF CLAIMS:** In acceptance of my participation in the "Wheatland Fishing Has No Boundaries" fishing event, I release WFHNB; the city of El Dorado; the County of Butler; all respective agents and employees of the aforementioned and all volunteers who are connected with this event from any liability or claims for any injury to body or property or illness that I sustain during my participation in this event. I understand that this release applies to myself; my personal attendant; heirs and assigns. I represent that I am capable of participation and acknowledge that this release is being relied upon by the above persons in permitting me to participate. I also grant full permission to any or all foregoing to use any photographs; videotapes; motion pictures or any other records of this event for any legitimate purpose.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ENTRY **MUST** BE SIGNED BY PARTICIPANT OR LEGAL GUARDIAN.