

WORLD CHAMPIONSHIP MUSKY CLASSIC

Boulder Junction, Manitowish Waters, Presque Isle, Winchester

OFFICIAL REGISTRATION FORM

RETURN TO: WCMC, PO Box 42, Manitowish Waters, WI 54545

(PLEASE PRINT CLEARLY)

Name _____

Address _____

City _____

State _____ Zip _____

Phone _____

CLASSIC FISHED

__77__78__79__80__81__82__83__84__85__86__87__88__89__90__91

__92__93__94__95__96__97__98__99__00__01__02__03__04__05

__06__07__08__09__10__11__12__13__14__15__16__17__18

FISHING PARTNERS

TOWNSHIP TO FISH

Boulder Junction ___ Escanaba, Big, Boulder, High & Fishtrap, Wildcat
Manitowish Waters ___ All of the Manitowish Chain above the Rest Lake Dam
Presque Isle ___ Crab, Presque Isle, VanVliet, Averill, Oxbow, Horsehead
Winchester ___ N. & S. Turtle, Rock, Harris, Birch, Papoose

DIVISION

OPEN _____ SPORTSMEN _____

Open division contestants are able to fish all four townships and can have a guide in their boat.

Sportsmen are fishing in just one township as per their registration.

All fishermen in a boat must be registered contestants. No non-registered fishermen are allowed in a boat during tournament hours.

TEAM NAME _____

A team consists of 2 to 10 fishermen registered with the same team name.

CLUB NAME _____

A club consists of 11 or more registered fishermen registered with the same club name.

**ENTRY FEE IS \$35 PER CONTESTANT, \$45 AT THE DOOR.
Make checks payable to: WCMC**

**LIABILITY WAIVER MUST BE COMPLETED ALONG
WITH REGISTRATION**

*I _____ (please print name)
am voluntarily participating in the 2019 World Championship Musky
Classic scheduled for September 6,7 & 8, 2019.*

*I am aware that my participation in this tournament creates the risk
of personal injury. My participation could also cause loss or damage
to personal property.*

*I expressly agree to assume all risks of personal injury/loss
to personal property or other tournament participants.*

*I hereby release and discharge the tournament sponsors/ donors
to the World Championship Musky Classic, and the World
Championship Musky Classic Corporation, their officers, agents and
all volunteer workers from any injuries, damages or loss sustained,
caused by negligence.*

*I have read the release of liability participation agreement
and understand all terms and conditions.*

Signed _____ Date _____

**EACH REGISTRANT MUST SIGN THIS FORM
(Or Legal Guardian if Registrant is a Minor)**

**If you have any questions, please call
Secretary Beth Meyer at 715-499-3245 or
President Beth Kebl at 715-543-2657
One registration form per person
Forms can be duplicated.**

Website: www.wcmuskyclassic.com

Raffle Tickets

_____ @ \$1 = \$ _____

Reg, @\$35
(\$45 at Door) = \$ _____

Scholarship
Donation: = \$ _____

Total \$ _____