



Entry Fee: \$260
(credit card: \$270)

Team Member #1	
Name _____	
Address _____	
City _____	
State _____	Zip _____
Cell # _____	
Social Security Number (required) _____	
Email _____	

Team Member #2	
Name _____	
Address _____	
City _____	
State _____	Zip _____
Cell # _____	
Social Security Number (required) _____	
Email _____	

By paying the entry fee and completing and signing this entry form, I acknowledge I have read and agree to all rules pertaining to this event. I also release Outlaw Outdoors and everyone associated with the event and event production from any and all claims of personal injuries and accidents as well as any damaged, lost or stolen property incurred in connection with the event. I agree to submit to a polygraph test if requested by the event director and agree to accept the results. I hereby grant Outlaw Outdoors, the unconditional, royalty free, perpetual, right and license to use my name, voice, and photographic likeness in promotions, and/or articles and press releases. I agree that I am not entitled to receive any royalties or other compensation in connection with such use.

Signature of Team Member #1 Date

Signature of Team Member #2 Date

