

WHITEHORN CIRCUIT ENTRY FORM

PLEASE RETURN WITH PAYMENT TO:

**% CYRINA LANG
33370 E. 700 Rd.
WAGONER, OK. 74467**

PLEASE WRITE WHERE WE CAN READ IT

CAPTAIN:

ADDRESS _____

CITY _____ **ZIP CODE** _____

PHONE _____ **CELL** _____

PARTNER: _____

ADDRESS: _____

CITY _____ **ZIP CODE** _____

PHONE _____ **CELL** _____

ALTERNATE _____

ADDRESS _____

CITY _____ **ZIP CODE** _____

PHONE _____ **CELL** _____

WHEN SIGNING THIS ENTRY FORM ANY INDIVIDUAL OR TEAM AGREES WITH THAT THE TOURNAMENT DIRECTOR WILL BE THE FINAL INTERPRETATION OF ALL RULES AND REGULATIONS. TEAMS ALSO CONSENT TO SUBMIT TO A POLYGRAPH EXAM IF REQUESTED AND THAT ITS RESULTS ARE FINAL. TAMS HAVE READ ALL RULES AND REGULATIONS AND AGREES BY SUCH. TEAMS UNDERSTAND AND AGREES THAT ANY PRIZE MONEY WILL BE PAID ACCORDING TO NUMBER OF CONTESTANTS. IN SIGNING THIS ENTRY FORM TEAM HEREBY WAVES AND RELEASES ALL OTHER CONTESTANTS, THE HOST, SPONORS AND TOURNAMENT OFFICIALS FROM ALL CLAIMS, INJURY, DEATHS, LOSSES AND OR DAMAGE INCURRED IN CONJUNCTION WITH THIS TOURNAMENT.

NO ALCOHOLIC BEVERAGE DURING TOURNAMENT HOURS