

# Carolina "Fishers of Men" Inshore Trail

## 2014 Liability & Release Form

**\*\*PLEASE PRINT CLEARLY\*\***

Participant's Name (Print first and last name): \_\_\_\_\_

E-mail \_\_\_\_\_

Phone (cell): \_\_\_\_\_ (other) \_\_\_\_\_

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

Emergency Contact (print name): \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

### **TO PARTICIPATE IN CAROLINA "FISHERS OF MEN" INSHORE TRAIL (CFMIT) EVENTS, I HEREBY AGREE TO THE FOLLOWING:**

1. To abide by the tournament rules as set forth by the Carolina "Fishers of Men" Inshore Trail at all times during the duration of any tournament during this calendar year.
2. To ensure that my vessel meets or exceeds all safety requirements set forth by the U.S. Coast Guard.
3. To abide by all final decisions of the Trail's Officers and/or Advisory Committee Members.
4. Carolina "Fishers of Men" Inshore Trail directors, officers or advisors assume no responsibility or liability for my safety, my vessel, my equipment, my crew/team members or my actions. Therefore I release all those mentioned and agree that they have no liability for any issues that may arise in my participation in this trail.
5. Please print and bring this completed form with you to the first tournament you participate in.

**PARTICIPANT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_