

**PICK IT FORWARD FOR ORPHANS**

**REELIN FOR THE KIDS**

***REGISTRATION FORM IF PAYING WITH A CHECK***

Team Member Number One Name: \_\_\_\_\_

Cell phone number: \_\_\_\_\_

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

Signature: \_\_\_\_\_

By entry into this tournament, we hereby waive and release Tournament Officials, Hosts, Sponsors, Agents, State, County or City Government & all other contestants from any and all claims of injury &/or materials & bodily damage incurred in connections with the Tournament.

Team Member Number Two Name: \_\_\_\_\_

Cell phone number: \_\_\_\_\_

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

Signature: \_\_\_\_\_

By entry into this tournament, we hereby waive and release Tournament Officials, Hosts, Sponsors, Agents, State, County or City Government & all other contestants from all claims of injury &/or materials & bodily damage incurred in connections with the Tournament.

***Please mail registration form and check to Jamie Jett, 8617 Woodlake Dr.,  
Haughton, La. 71037***