

REGISTRATION FORM  
Monterey Bay Veterans Inc.  
29<sup>th</sup> Annual Wheelchair Salmon Derby

May 7, 2016

Name: \_\_\_\_\_  
(Last) (First) (MI.)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_ Gender: M \_\_ F \_\_  
Do you use a wheelchair for transportation? No \_\_\_\_ Yes \_\_\_\_  
Percent and type of Physical Disability? \_\_\_\_ % \_\_\_\_\_  
(This information helps us put you on the best type of boat)

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Only ONE non-fishing attendant (if needed) per physically challenged angler is allowed! Is that person an experienced angler? Yes \_\_\_\_ No \_\_\_\_  
Non-fishing attendant's Name \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ E-Mail \_\_\_\_\_ Gender? M \_\_ F \_\_  
Non-fishing attendant is required to assist you, but may not fish !

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Will you be at the pre-registration Dinner Friday May 6? Yes \_\_\_\_ How Many? \_\_\_\_ No \_\_\_\_  
Will you be at the Awards Banquet on Saturday May 7? Yes \_\_\_\_ How many? \_\_\_\_ No \_\_\_\_

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No Electric or three wheeled chairs will be loaded on boats. No alcohol is allowed! **All prize winners may be required to show proof of type and percent of disability!**

I certify by completing and signing this form that I have at least a forty (**40%**) *percent physical disability*, and I will abide by the aforementioned rules and regulations of the Derby. By signing this form I give the Monterey Bay Veterans, Inc. permission to use my likeness in any publication. If you fail to complete all the requested information and sign, your application will be denied! I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the Monterey Bay Veterans, Inc. Officers, directors, Boat Captains, and volunteers from any and all liabilities or claims made as a result of participation in this activity or event, whether caused by the negligence of release or otherwise.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Revised January 30, 2016

For more information, contact:  
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