

“Captain” Volunteer Registration Form
Monterey Bay Veterans Inc.
29th Annual Wheelchair Fishing Derby

Saturday May 7th

Name: _____
(Last) (First) (MI.)

Address: _____
(Street) (City) (State) (Zip)

Phone:(_____) _____ **E-mail** _____ **Gender:**M___F___

Do you have a boat, and will you use it in Monterey for Saturday May 7th Yes___No___

Vessel Name _____ Size _____ Model _____ Head? Yes___No___

Will you use your boat take disabled veterans Salmon fishing in your Home Harbor between April 2-May 6 to compete in the Derby. This will allow us to expand to other ports.

Yes___No___

Are you a member of a fishing club? _____ Name of club _____

Is your Boat director/deck hand a experienced angler? Yes___ No___

Director/ deck hand name: _____

Phone: () _____ E-Mail _____ Gender?M___F___

Will you be at the registration Dinner on Friday? Yes _____ How many? _____ No _____

Will you be at the Awards banquet on Saturday? Yes _____ How many? _____ No _____

How many disabled anglers will you take? Saturday May 7th _____?

No alcohol will be allowed on vessel during the Derby!

I certify by completing and signing this form that 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/media. I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the Monterey Bay Veterans, Inc. Officers/ Directors, 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 _____

For more information, contact:
Monterey Bay Veterans, Inc. ~ PO Box 481 ~ Monterey, CA. 93942
(831) 901-0217 mbvinc@pacbell.net www.mbv.org