

9th Annual
CONCH HOUSE
MARINA RESORT



St. Augustine - Florida

*Please fill out and
fax, email, or mail to:*
Phone: 904-824-4347
Fax: 904-829-6998

Marina@conch-house.com
ATTN: MARK HELMAN
57 Comares Ave,
St. Augustine, FL 32080

BOAT NAME: _____ MAKE & SIZE _____

OWNER: _____ PHONE #: _____

ADDRESS: _____

CAPTAIN: _____ PHONE #: _____

TOTAL \$ _____ (\$500 entry fee, \$550 after March 1st, 2018)

EMAIL ADDRESS: _____

PAYMENT INFORMATION (please check one):

- Check *Make all checks payable to:
The Conch House Marina Resort
- Credit Card 57 Comares Ave
- Cash St. Augustine, FL 32080

PAYOUT STRUCTURE:

This is the total weight tournament. Heaviest 2 fish will win.

Hold Harmless Release:

I, as an entrant, do hereby release, discharge and hold harmless Conch House Marina, its officers, directors, sponsors, and marketing agents, whether individual or corporate, from any claim for damages to my person or property incurred by my participation in the Conch House Wahoo Challenge. This release applies to all members of my crew and all parties fishing from my boat. By signing the entry form and paying my entry fee, I acknowledge that I have read this release and rules concerning this tournament and am bound by the same. This release shall also be binding on my heirs, executors, administrators, or assignees.

SIGNATURE: _____