



Federation Nation of Virginia Bass Anglers  
BOAT CAPTAIN RELEASE FORM

Release of liability, Consent for Medical treatment and Assumption of risk Agreement

Having acquainted me with the rules, I have completed this application and submit it for FFNVBA and BASS Federation Nation of Virginia (FNV) records. In signing this application, and by his/her/my presence at the event, I as a Boat Captain, hereby agree to be bound by and comply with all Tournament rules and regulations. I expressly assume all risks associated with the Tournament and I hereby release, hold harmless and forever discharge, The Bass Federation, Inc. (FNV, FFNVBA), B.A.S.S.- ESPN Federation, and its Staff, the event host, all sponsors, volunteers and tournament officials, (hereinafter "Release") from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, property damage, or personal injury, including death, that may be sustained by me, or any property belonging to me, whether caused by the negligence of any of the releasees or otherwise in while participating in any event hosted by the releasees. I hereby grant FFNVBA the unconditional right to use my named, voice, photographic likeness and biographical information and fishing tips and instructions in connections with any and all tournaments video/audio production and or articles and press releases. I shall not be entitled to receive any royalties or other compensation in connection with such use. I further understand and agree that the tournament Director reserves the right to reject this application for any reason. I hereby consent to and authorize tournament officials to apply/secure or authorize emergency medical treatment on our own behalf, in the case of injury or emergency. I agree to assume full responsibility for payment of any and all fees incurred as a result of such medical treatment.

Boat Captain Release:

As the Boat Captain, I have read and fully understand the above release of liability, consent for medical treatment and assumption of risk agreement as well as all the tournament rules. I fully understand them, understand that I have given up substantial rights by signing them and agree to be bound by them. I sign it freely and voluntary and without any inducement. Note: A copy of the Boat Captain's Insurance Policy with Liability coverage of a minimum of 100K must be submitted with this form:

Do you have any physical impairment of medical conditions that we need to be aware of, Yes \_\_\_\_\_

No \_\_\_\_\_? Explain on reverse side.

EVENT: \_\_\_\_\_ DATE: \_\_\_\_\_

Signed Boat Captain: \_\_\_\_\_ date: \_\_\_\_\ \_\_\_\_\ \_\_\_\_

Emergency Contact:

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone # (\_\_\_\_) \_\_\_\_\_ Night Phone # (\_\_\_\_) \_\_\_\_\_