



2020 MEMBERSHIP FORM

PLEASE PRINT LEGIBLY

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Age _____ Phone: _____

E-mail: _____

NBAA Directors Name: _____

Which Division do you fish: _____

_____ (1 YR) NBAA Standard membership \$40.00

_____ (1 YR) NBAA SUPER membership \$60.00

(NBAA SUPER membership includes; FULL 2020 NBAA, 2020 TBF memberships NOT already paid!)

*Each individual person must fill out a completed membership before being allowed to participate in any NBAA event.

COMPLETED FORM AND PAYMENT SENT TO: NBAA, 5998 N Pleasant View Road, Ponca City, Ok. 74601 P – 580.765.9031, F- 580.765.2890 E-MAIL: membership@nbaa-bass.com www.nbaa-bass.com

FOR CREDIT CARD PAYMENT: 3% fee is added to CREDIT CARD PAYMENTS. THEY CAN BE FAXED OR MAILED! VISA OR MC ONLY!
CARDHOLDER NAME: _____
CREDIT CARD #: _____
EXPIRATION DATE: ____ / ____
3 DIGIT SECURITY CODE _____ (LISTED ON BACK)

MUST BE COMPLETED BELOW

Boat, Angler and AOY info

Brand: _____ Model: _____ Year: _____

Engine _____ HP

Equipment you will use this season.

Cabela's Ranger Boats Evinrude

Hummingbird TH Marine Minnkota

How many days per year do you fish? _____

T-Shirt Size _____

nbaa-bass.com

Participant Agreement, Release of Liability.

In consideration for permission to voluntarily participate in tournaments, events, programs, and related activities conducted by NBAA, LLC (NBAA) its parent and affiliate companies separately, I acknowledge, appreciate, and agree that:

I have read and understand the description of the tournament and the official rules and understand that any violation whether intentional or unintentional on my part will justify penalties, including forfeiture of my entry and or member fees, disqualification either from a single event or permanent disqualification from any current or future NBAA events. I also understand that tournament officials may reject my application for any reason and in that event will refund my entry fee.

I understand and acknowledge that the risk of injury, disability, death, loss or damage to my person or property from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,

I have been advised by NBAA, and have had the opportunity to seek legal counsel with respect to the legal effect of this document; and I KNOWINGLY AND FREELY ASSUME ALL RISKS REFERRED TO HEREIN, both known and unknown, even if arising from the negligence of NBAA, LLC (NBAA), Their owners, officers, officials, directors, shareholders, agents, and/or employees, or other Participants, and sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises and property used to conduct the event ("releases") or others AND ASSUME FULL RESPONSIBILITY FOR ALL RISKS ARISING FROM MY PARTICIPATION; AND,

I willingly agree to comply with the terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the immediate attention of the nearest official, and,

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, indemnify, and hold harmless "releases", with respect to any and all injury, disability, death, or loss or damage to person or property, which I suffer or which I am found to have caused in whole or in part by my negligence, or misconduct whether arising from the negligence of the "releases", or otherwise, to the fullest extent of the law.

I agree to submit, by signature on this document and my presence at any NBAA event, to a polygraph or voice stress analysis examination. Hereinafter known as a truth verification test, and abide by its conclusion. Truth verification test(s) will be used at NBAA's sole discretion, and administered by NBAA or its agents. I understand that failure to pass the examination as determined by NBAA will result in disqualification. I certify that the number I have given tournament officials is my correct taxpayer identification number.

If I am using a boat during the official practice or during the tournament, I certify that I now have, or will obtain prior to the event, property damage/watercraft liability insurance having a reasonable limit. I hereby waive my rights of privacy or publicity with regard to the unconditional right to use my name, voice, photographic likeness, video and biographical information in connection with any reproduction of same, video/audio productions and/or articles and press releases by NBAA, their parent or affiliate companies, and those acting under their permission, anywhere at any time, through any medium or media. 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 officials reserve the right to reject my application for any reason whatsoever.

My signature below reflects that I have read this entire document, understand it completely, understand that it affects my legal rights, and agree to be bound by its terms. References herein to "I" "my", "myself" and other first-person references shall include any spouse, child or ward for which I sign.

Signature _____

For more information and rules go to www.nbaa-bass.com SIGNATURE ALSO APPLIES FOR THOSE USING CREDIT CARDS