

OFFICIAL ENTRY FORM

29th Annual Cheeca Lodge Presidential Sailfish Tournament Friday, January 25 – Sunday, January 27, 2019

Entry Fee: \$675 for the 1st Angler

\$600 for each additional angler

(up to 4 per boat)

After January 11: \$775 for the 1st Angler

\$700 for each additional angler

First angler receives gift bag and two social tickets to each banquet.

Each additional angler receives gift bag and one social ticket to each banquet.

Boat/Team Name:						
Docked at During the	Tournament:					
Niversia and Augustana						
Number of Anglers:						
Boat Location.						
1 ST ANGLER						
Address:						
City:		State: _	Zip:			
Cell Phone:	Email:					
Shirt Size:	RSVP Friday Kickoff Dinner		RSVP Sunday Awards Dinner:			
Signature:						
2 ND ANGLER						
Name:						
Address:						
City:		State: _	Zip:			
Cell Phone:	Email:					
Shirt Size:	RSVP Friday Kickoff Dinner		RSVP Sunday Awards Dinner:			
Signature:						
<u> </u>						
3 RD ANGLER						
			 Zip:			
			RSVP Sunday Awards Dinner:			
	·		·			
Signature:						

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4TH ANGLER

Name:							
Address:							
City:							
Cell Phone: Email:							
Shirt Size: RSVP Friday Kickoff Dinner		RSVP Sunday Awards Dinner:					
Signature:							
CAPTAIN							
Name:		Check if registered a	s Angler				
Address:							
City:	State: _	Zip:					
Cell Phone: Email:							
RSVP Friday Dinner RSVP Sunday Awar	rds Dinne	er					
Signature:							
Tournament Kickoff and Awards Banquet will be held at Cheeca Lodge & Spa.							
Would you like someone to contact you for lodging reservations? Yes No							

*All Event RSVPs must be received no later than Monday, January 21, 2019. Additional banquet tickets can be purchased for Friday and Sunday events.

Tournament Contacts: Lisa Thornhill at (305) 517-4512 or Liz Hill at (305) 451-5094 PLEASE EMAIL COMPLETED FORMS TO: Ithornhill@cheeca.com

I certify that I have read the tournament rules and agree to abide by them, including rules #18 & #19.

All participants in the Cheeca Lodge & Spa Presidential Sailfish Tournament enter at their own risk. Officials, committee members and all persons connected directly or indirectly with this tournament shall be exempt from any liability suffered to any participant, entrant, sports fisherman, their companions, captains, vessels and equipment which may occur during this tournament. Participants may be photographed at this event and these photographs may be used in conjunction with promotion of this event. I understand and agree to the above paragraph and agree to abide by the Cheeca Lodge & Spa Presidential Sailfish Tournament rules.

PAYMENT INFORMATION

Please e-mail completed forms to: lthornhill@cheeca.com If you wish to pay by check, please make them payable to Cheeca Lodge & Spa and mail to: Cheeca Lodge Presidential Sailfish Tournament, c/o Lisa Thornhill, P.O. Box 527, Islamorada, FL 33036.

If paying by credit card, please complete Cheeca's Credit Card Authorization Form (See Page 3).

CHEECA LODGE & SPA

ISLAMORADA • FLORIDA KEYS

Authorization to Charge Credit Card

As a signer on the card listed below, the cardholder authorizes this card to remain in effect and I authorize Cheeca Lodge & Spa to charge this card for any and all unpaid balances due from the following services provided below:

ALL HOTEL CHARGES ROOM & TAX CHARGES RESORT FEE & TAX FOOD & BEVERAGE CHARGES BANQUET FUNCTION CHARGES INCIDENTAL CHARGES PHONE CHARGES OTHER 2019 Presidential Sailfish Tournament

Card Type: () AMEX () Visa	a/MC() Diners() E	Discover () Debit Card			
Please note: If you are providing us with a debit card, our credit card authorization system captures these funds automatically taking the money out of the bank account. The credit will be posted to your hotel account immediately but if you eventually pay with another method, it may take up to 10 days to reverse this original charge and credit the bank account. By signing below, you are authorizing this procedure.					
Name(as it appears on credit card		Phone			
Full Card Number	Expiration (mm/yy)				
CVV2 Number (Security code lo	cated on back of card	d)			
Billing Address					
City	State	Zip Code			
Signature of cardholder:					