

N.O.E.A. FISHING TOURNAMENT

2008 REGISTRATION FORM

Liability Waiver - Each Attendee Please Read & Sign. I agree and acknowledge that I and my invited guests that participate in the NOEA Fishing Tournament events and activities are responsible for our own free and intentional acts. We are fully aware that possible injury might occur to us as a result of our participation. We give this acknowledgment freely and knowingly and as a result, we are able to participate in NOEA activities and do hereby assume responsibility for our own well-being.

Members Signature → _____

MEMBERS NAME	_____
(Please Print)	
COMPANY NAME	_____
ADDRESS	_____
CITY, ST. ZIP	_____
PHONE #	_____
FAX #	_____
FISHING LOCATION:	<input type="checkbox"/> GRANDIALE <input type="checkbox"/> VENICE

(The name in this location ↑ will receive notice of the Award Banquet)

OTHER *MEMBERS: (\$ 20.00 EACH) ↓	AMOUNT _____

* Member of the Electrical Association of New Orleans

GUEST OF *MEMBER: (\$ 25.00 EACH) ↓	AMOUNT _____

(Use back of sheet, if needed.) AMOUNT _____ ←

DATE _____ **TOTAL AMOUNT** _____ ↓

<p style="text-align: center;">LATE REGISTRATION:</p> <p style="text-align: center;">(POSTMARKED AFTER MAY 23rd. PLEASE PAY:)</p> <p style="text-align: center;">MEMBERS \$ 25.00</p> <p style="text-align: center;">GUESTS \$ 30.00</p>	<p><i>PLEASE CHECK METHOD OF PAYMENT</i></p> <p><input type="checkbox"/> CHECK OR <input type="checkbox"/> CASH</p> <p><input type="checkbox"/> REGISTRATION INCLUDED IN</p> <p><input type="checkbox"/> SPONSOR FEE PAYMENT</p> <p><input type="checkbox"/> SHIRT (PLEASE CHECK)</p>
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PLEASE MAIL THIS FORM WITH YOUR CHECK TO:

MAKE PAYABLE TO:
 N.O.E.A. FISHING TOURNAMENT
 P.O. BOX 7885
 METAIRIE, LA. 70010

This space for office use only

R _____
T _____
S _____

ATTN: RENE PHILIBERT
 ANY QUESTIONS CALL: 504-887-9500