

2010 Annual Peace King Cup Fishing Tournament
Boat Owner/Shore Fishing Registration Form
2-Day Registration donation - \$40 per person

Please respond by May 1st at 12 noon ALL PARTICIPANTS MUST PRESENT VALID N.Y.S. FISHING LICENSE
by email: hsaclifton@optonline.net or by fax: 1-973-916-0056

Gender:

M F

Legal Passport Name:

Honorific	First Name	Middle Name	FAMILY NAME
<small>(Rev. Mr., Ms., Hon., Dr., etc.):</small>			

Name Badge: _____

No more than 26 characters. Include honorific, such as Ven., Dr., Mr., Ms.

Job Title: _____

Organization: _____

Mailing Address: _____
Number and Street (No P.O. Boxes please)

City	COUNTRY (if in USA, give State)	Postal Code
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Office Phone: _____ **Office Fax:** _____

E-mail Address: _____

Name of Vessel and Registration Number: _____

Names of Additional Participants on Vessel: 1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____ 7. _____

Do you have any medical conditions we should be aware of:

Participant Signature: _____ Date: _____