## 2025 OFFICIAL ENTRY FORM \$500.00 Entry Fee





Partn	ner #1			
Addre	ess			BOAT INFO:
	- (		Zip	Boat Brand
	e ( ) il			Outboard Brand_
Partn	ner #2			
	ess			
City_		State	Zip	IT IS REQUIRED THAT ALL BOATS HAVE A
Phone	e ( )	_		LIVEWELL WITH A RECIRCULATING OPTION.
E-mai	il			
	is organized and operated by The C claims, demands, costs or fees relat unforeseen and which may be attril Further I hold harmless and indem where any other person or passeng incur in defense of my acts and om limited to: loss of life, loss of limbs, frostbite, sun stroke and all other ir Challenge et al for all damages rel and/or unforeseen weather condition will be heard in the MN Dist. Ct. for B. COVENANT NOT TO	E AND HOLD HARM CAG Foundation, its of ing to injury to any populated to Safelite Legacy Coper suffers any type of issions and negligence electrocution, paralysically in the tat may be caused atting to adverse weath ins occur prior to, during the Louis County, Months of Suffer County, Months of	MLESS AND INDEMNIFICA' fficers, directors, agents, volur erson or property which I or ar cy Challenge et al's negligence Challenge. et al, for any acts who damage whatsoever. I agree to e. I understand that by participatis, coma, loss of mental functions while participating or after the tournament. I a MN applying MN laws.  F SUBROGATION. I agree th	TION AGREEMENT. I hereby release the Safelite Legacy Challenge which theres or employees, sponsors and Joe Artim from all negligence, damages, at passenger may sustain and which is caused by any negligence, foreseen of a cause or omissions, and which is related to my participation in this activity. In hich may be attributable in part or in whole to my actions or negligence and to hold harmless Safelite Legacy Challenge et al, for any attorney's fees they ting in this tournament that I may cause or sustain injury including but not ones, loss of sight, loss of speech/smell, dehydration, exposure, hypothermia, or exposure to the elements. I further release and indemnify Safelite Legacy ing in this Tournament. It is my responsibility to seek safety should adverse gree that any litigation between myself and Safelite Legacy Challenge et al at I will not sue Safelite Legacy Challenge et al for damages on account of the rewhich may develop in the future. In the event a claim is made against
	Safelite Legacy Challenge et al on from any liability whatsoever, included	account of my neglige ading court costs and a aiving the rights of re	ence, actions or omissions, I exattorney's fee, arising with res	pressly agree to indemnify and hold Safelite Legacy Challenge et al harmle pect to such actions. I understand that in waiving my rights to sue Safelite Challenge et al of my insurance carrier for
C.				
D.	POLYGRAPH/VOICE STRESS TEST Failure to take or pass the polygraph/voice stress examination when asked to will result in disqualification without recourse			
E	PUBLICITY. In consideration for permission to participate in the Safelite Legacy Challenge I hereby grant to The CAG Foundation and its assignees the unconditional right to use my name, voice, photographic likeness, and biographical information in any medium whatsoever, including but not limited to video/audit productions, merchandising, promotions, articles, and press releases. I understand that I will not be entitled to receive any royalties and other compensation in connection with such use and waive my right to review the finished product.			
F.	I SIGNIFY by my signature that I have read all Tournament rules and this liability release and agree to abide by all rules, regulations, releases, and tournament official's decisions. I agree that this release is binding for all Safelite Legacy Challenge events in which I may participate including the championship invitational.			
Sig	gnature			Date
Sic	gnature			Date
•				WELLE CAC FOLLING ATLANTS

PLEASE MAKE CHECKS PAYABLE TO "THE CAG FOUNDATION" c/o The CAG Foundation, 26109 Hidden Road, Akeley, MN 56433 • (218) 966-3866 Or register online at www.safelitelegacychallenge.com