

# Blaine Festival

## 2017 Team Entry Form - Blaine Festival Bag Tournament

**DATE:** Sunday, June 25th

**TIME:** On-site Sign-up 10:30 a.m.  
Bags Fly at 11:30 a.m.

**LOCATION:** Aquatore Park,  
Adjacent to the "Big Top"

**Team Entry Fee & Tournament Information:** \$20.00 per 2-person team. All entries will be processed in order of receipt and are subject to availability. Tournament rules are posted at [www.blainefestival.org/bag](http://www.blainefestival.org/bag) tournament. Double elimination tournament, guaranteed 2 games. Cash payout for 1st place is \$250.00, 2nd place is \$100.00, and 3rd place is \$50.00. Bags fly rain or shine.

**Payment:** Cash (preferred) or Check (made out to Blaine Festival)

**How To Register:** Submit your complete and signed form, along with your registration fee to Blaine Festival, Attention: Bag Tourney, PO Box 490563, Blaine, MN 55449-0563.

**Waiver:** In consideration of sponsors accepting this entry form, I, on behalf of myself and any and all of those who may have right to seek recourse on my behalf, hereby waive, release and forever discharge all sponsors, its representatives, agents, co-sponsors, participants, officials, and all others connected with Blaine Festival from any and all rights and claims that may accrue for any injuries or damages incurred by me in connection with my association with, during, or after the Blaine Festival Bag Tournament. I fully understand that it is my obligation to determine, prior to the Blaine Festival Bag Tournament, that I possess the proper physical and mental capabilities to participate. My signature, below, indicates my review and agreement to all terms. Please Note: This waiver includes any Blaine Festival photos that may be taken during tournament play.

**Team Name:** \_\_\_\_\_

### Player #1 Information

*(Please PRINT All but Signature)*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Date: \_\_\_\_\_

**Signature:** \_\_\_\_\_

### Player #2 Information

*(Please PRINT All but Signature)*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Date: \_\_\_\_\_

**Signature:** \_\_\_\_\_