

## Heartland Trails ENTRY FORM

We have read and understand the rules that are published on the Heartland Trails Website. In signing this Entry form, we hereby waive, and release all other contestants, sponsors, government entities and their agents, Heartland Trails, and tournament officials from all claims from injury and/or damages incurred in connection with all tournaments on this trial for the 2026 Year. We further agree to abide by the Tournament Director's decision in all matters and agree there is not a right of appeal from their decision. PLEASE PRINT. INCOMPLETE ENTRY FORMS WILL NOT BE ACCEPTED.

POINTS WILL BE APPLIED TO: \_\_\_\_\_ Team Trail or Elites.

BOATERS NAME: \_\_\_\_\_ MEMBER ☐ NEW MEMBER ☐ ALTERNATE ☐

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

BOAT MFG: \_\_\_\_\_ YEAR: \_\_\_\_\_ OUTBOARD: \_\_\_\_\_ YEAR: \_\_\_\_\_

SPONSORS: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PARTNERS NAME: \_\_\_\_\_ MEMBER ☐ NEW MEMBER ☐ ALTERNATE ☐

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: : \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

SPONSORS: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

AMOUNT PAID: \_\_\_\_\_ CHECK ☐ CASH ☐ CREDIT CARD ☐ BOAT # \_\_\_\_\_

Name on Card: \_\_\_\_\_ Card # \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Digits on Back: \_\_\_\_\_ \$10.00 fee applies

**\$240.00 Team Trail Entry Fee, \$200.00 Elites Entry Fee, \$30.00 Membership per angler**

Make checks payable to HEARTLAND TRAILS.



**Mailing Address: Heartland Trails, P.O Box 471 Excelsior Springs MO 64024**