

South Carolina Department of Natural Resources

Youth Bass Tournament Team Registration Form

(Registration open from December 1, 2023 8:00 AM until February 12, 2024 5:00 PM)

REGISTRATION INSTRUCTIONS:

Complete the following forms:

 1)*Registration Form (one per school)
 2) SCDNR Liability Waiver (one per student, including substitutions)
 3) Proof of Boat Captain's liability insurance with coverage of \$300,000

 Mail all forms to: Will Mundhenke, SCDNR PO Box 167 Columbia, SC 29202. Must be postmarked by February 12, 2024.
 Registration Packets can also be sent via email as an attachment to MundhenkeW@dnr.sc.gov
 SCHOOL INFORMATION

(Check appropriate bo	x) Middle School	or Hig	gh School						
School Name									
School Address									
City		Sta	ate	Zip Code					
School District		Pri	incipal Nam	ne					
Superintendent Name			Athletic Director Name						
Coach Name			E-mail Add	ress					
Mailing Address									
City	S	State			Zip				
Coach Name			E-mail Address						
Mailing Address									
City	S	State			Zip				

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Student Name									
Student Address									
City			State				Zip		
Student Phone No.			E-mail Addre	ss			Date o	f Birth	
Student Name									
Student Address									
City			State						
Student Phone No.	No.		E-mail Addre	ss				f Birth	
Team 1 Boat		Boat Ca	aptain			Boat Regist	ration		
A copy of the All Participant entirety of the	boat captain's liabil s and boat drivers i tournament while o	Cell Phe ity insur must we	one No. ance is requ ar a U.S. Co		rsor	No.		vice (P	PFD) the
A copy of the l	s and boat drivers i	Cell Phe ity insur must we	one No. ance is requ ar a U.S. Co		rsoi	No.		vice (P	PFD) the
Angler Pair 2	s and boat drivers i	Cell Phe ity insur must we	one No. ance is requ ar a U.S. Co		rsor	No.		vice (P	PFD) the
Angler Pair 2 Captain Name A copy of the land of the	s and boat drivers i	Cell Phe ity insur must we	one No. ance is requ ar a U.S. Co		rsoi	No.		vice (P	PFD) the
Angler Pair 2 Student Address	s and boat drivers i	Cell Phe ity insur must we	one No. ance is requerar a U.S. Corater.	past Guard Per	rson	No.	on Dev		PFD) the
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A copy of the boat captain's liability insurance is required.

Team 1 Boat

Captain Name

All Participants and boat drivers must wear a U.S. Coast Guard Personal Floatation Device (PFD) the entirety of the tournament while on the water.

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Boat Captain

Cell Phone No.

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Boat Registration

No.

Substitute Anglers: Only anglers added as substitute anglers during registration will be allowed to take the place of existing anglers in the instance that these anglers can no longer compete. All substitutions including boats and captains must be finalized at the conclusion of the boater safety check on March 1, 2024.

Student Name										
Student Address										
City			State					Zip		
Student Phone No.			E-mail A	Address				Date o	of Birth	
Student Name										
Student Address										
City			State					Zip		
Student Phone No.			E-mail A	Address				Date o	of Birth	
Which of the following B.A.S.S. Junion	ing affiliations are you	-	_	all that a		Птвғ 🤄	Student Angle	er Fede	ration	
Team 1 Boat Captain Name		Boat Ca Cell Ph					Boat Regist No.	-		
Substitute Angle existing anglers in the	tournament while ours: Only anglers addense instance that these the conclusion of the	ed as sul anglers	ostitute a	onger co	mpete.	All substi				
Student Name					,					
Student Address										
City			State					Zip		
Student Phone No.			E-mail A	Address				Date o	of Birth	
Student Name										
Student Address										
City			State					Zip		
Student Phone No.			E-mail A	Address				Date o	of Birth	
Which of the following affiliations are you apart of ? Check all that apply. B.A.S.S. Juniors B.A.S.S. High School TBF Juniors of SC TBF Student Angler Federation										
Team 1 Boat Captain Name		Boat Ca Cell Ph	aptain one No.				Boat Regist No.	ration		

A copy of the boat captain's liability insurance is required.

• All Participants and boat drivers must wear a U.S. Coast Guard Personal Floatation Device (PFD) the entirety of the tournament while on the water.

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