



May 31st - June 3rd, 2023  
2 out of 3 Fishing Days  
Captain's Call

## REGISTRATION FORM

BOAT NAME \_\_\_\_\_ OWNER NAME \_\_\_\_\_ PHONE \_\_\_\_\_

OWNER ADDRESS \_\_\_\_\_

CAPTAIN \_\_\_\_\_ BOAT MAKE \_\_\_\_\_ SIZE \_\_\_\_\_

EMAIL \_\_\_\_\_ DOCK LOCATION \_\_\_\_\_

PAY TO \_\_\_\_\_ WINNER ADDRESS \_\_\_\_\_

WINNER SSN \_\_\_\_\_ HMS PERMIT # \_\_\_\_\_

### PLEASE CHECK APPROPRIATE BOXES

**Level 1 - \$2000.00 Mandatory Entry - BILLFISH CATEGORY - Total Billfish Points**  
1st Place 70%  
2nd Place 20%  
3rd Place 10%

**Level 2 - \$1500.00 Must Enter Level 1 - BLUE MARLIN BONUS CATEGORY - Total BM Points**  
1st Place Winner Take All

**Level 3 - \$1000.00 Must Enter Level 1 - DAILY RELEASE CATEGORY - Total Billfish Release Points Daily**  
1st Place Thursday **Entry Fee Divided 3 Ways**  
1st Place Friday  
1st Place Saturday

**Level 4 - \$1000.00 Must Enter Level 1 - OUTBOARD BOAT CATEGORY - Total Billfish Points**  
1st Place Winner Take All

**Level 5 - \$500.00 Must Enter Level 1 - HEAVIEST MEAT FISH CATEGORY - Entry Fee Divided 3 Ways**  
1st Place Yellowfin Tuna  
1st Place Dolphin  
1st Place Wahoo

*I, the undersigned, as entrant, do hereby RELEASE, DISCHARGE and HOLD HARMLESS Cape Fear Blue Marlin Tournament, its officers, directors, committee members and sponsors, whether individual or corporate, from any claim for damages to my person or property incurred by my participation in the Cape Fear Blue Marlin Tournament. This release applies to all members of my crew, their families and all parties fishing from my boat. By Signing this entry form and paying my entry, fee, I Acknowledge that I have read and reviews the rules and regulations of the tournament and will prove a representative at the Captions party to inform us of any rules changes at that meeting. I also acknowledge and understand that the rules committee's decisions are final. Furthermore I have reviews this release with my party and crew and are bout by the same. This relate shall be binding on heirs, executors, administrators or assigns.*

\_\_\_\_\_  
PRINT NAME / SIGNATURE

Checks Payable to: Cape Fear Blue Marlin Tournament      Mail To: PO Box 554 Wrightsville Beach, NC 28480  
Bobby Brown: 910-520-0442      Email: rules@capefearbluemarlin.com