



Illinois B.A.S.S. Federation Nation

Open Tournament May 20th 2012

Lake Shelbyville – 9th Street Boat Ramp



This is a Team Format. There will be a 5 fish 14" limit per boat.

\$4,500 PAYOUT
First Place \$2,500
Second Place \$1,000
Third Place \$500
4th Place \$225
5th Place \$150
6th Place \$125

Entries will be accepted till 5:00 am on tournament day, no checks please.
 Boat position will be determined by Order of entry. pretournament meeting held at the launch at 6:00AM.

** Payout listed above is based on 45 Boats paid **

Join us for our open tournament hosted by the IBFN for 2012.

Guest MC Frank Hyla of
"Time on the Water Outdoors"



2012 IBFN Open Schedule

- May 20th Lake Shelbyville
- July 1st Lake Springfield
- July 22nd Pool 13
- Sept 16th Kankakee River



Please print clearly

Boaters Name _____ Co-Angler _____

Boaters Address _____

City _____ State _____ Zip _____ Phone _____ Cell # _____

Boaters Email Address _____

Co-Anglers Email Address _____

Entry Fee is \$125.00 per Boat - Fish as a team.

In signing this application, I here-by waive and release all contestants, sponsors, officials and the Illinois B.A.S.S. Federation Nation from all claims, injury, or damage that may be incurred in connection with this tournament. I understand fully that I am responsible for my own insurance and will provide proof of such insurance if requested along with this application.

My signature certifies that I am over the age of 18. The rules of this tournament are set by the IBFN appointed tournament chairman, and the IDNR permit granted. I have read and am familiar with and agree to abide by them. I understand that all remaining boater's will draw at tournament registration to establish the take-off order. I understand that I am not required to have a co-angler for this event and **polygraph tests may be conducted for any team or individual receiving a payout from this event.**

I understand and agree, if I refuse to complete the polygraph test I will forfeit my winnings.

Boater Signature _____ Date _____

Co-Angler Signature _____ Date _____

Mail entry form and check to: IBFN, P.O. Box 7657, Westchester, IL. 60154

Visit our web site www.ibfnation.com