

**BUCKS COUNTY ANGLERS CLUB  
2025 APPLICATION FORM**

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE: HOME \_\_\_\_\_ WORK \_\_\_\_\_  
E-MAIL \_\_\_\_\_  
FISHING LICENSE NO. PA \_\_\_\_\_ NJ \_\_\_\_\_  
PENN WARNER MEMBERSHIP NO. \_\_\_\_\_  
BOAT INSURANCE CO. NO. \_\_\_\_\_ EXP DATE \_\_\_\_\_  
BOAT REGISTRATION NO. \_\_\_\_\_ MAKE \_\_\_\_\_  
LENGTH \_\_\_\_\_ HORSEPOWER \_\_\_\_\_ Boater safety number \_\_\_\_\_

**MEMBERSHIP FEE \$100.00 PER YEAR.  
THIS INCLUDES SPOUSE (as recognized by PW - Family Membership), AND ANY CHILDREN UNDER 18 YEARS OF AGE. Also PLEASE NOTE College Students receive a break and are allowed by PW to purchase a Junior Membership.**

**In consideration of being allowed to participate in any way in the Buck County Anglers Club Tournament Trail program events and activities of the fishing tournaments for 2025, I, \_\_\_\_\_ the undersigned acknowledge, appreciate, and agree that:**

**1 The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce the risk, the risk of serious injury does exist and,**

**2 I KNOWINGLY AND FREELY ASSUME ALL SUCH RISK, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or other, and assume full responsibility for my participation and,**

**3 I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately, and,**

**4 I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Bucks County Anglers Club, its officers, other participants, and if applicable, owners and leasers of premises used to conduct the event (releasees), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent of the law.**

**5. I carry a minimum of \$300,000 Boat liability insurance as required by BCAC'S Insurance policy.**

**I HAVE READ THIS RELEASE OF LIABILITY and ASSUMPTION OF RISK AGREEMENT AND HAVE READ THE BUCKS COUNTY ANGLERS CLUB TOURNAMENT RULES, FULLY UNDERSTAND THEIR TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. The contestant signifies by his/her signature below that he or she has read and understands the foregoing provisions.**

MEMBERSHIP FEE PAID \_\_\_\_\_  
SIGNATURE \_\_\_\_\_  
SIGNATURE OF CLUB OFFICER \_\_\_\_\_ DATE \_\_\_\_\_