WISCONSIN MUSKIE TOUR 2010 OFFICIAL REGISTRATION FORM	
Partner One:	Partner Two:
Name	Name
Mailing Address (New Address?? Yes No)	Mailing Address (New Address?? Yes No)
Mailing Address (New Address!: 165 No)	Midling Address (New Address:: 165 140)
	
City	City
State Zip Code	State Zip Code
Phone Number (HOME or CELL – circle one)	Phone Number (HOME OR CELL – circle one)
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Tournament Entry and Payment: The entry fee is \$320.00 per one-day or two-day tournament, per team. A half payment of \$160.00 per tournament	
entered will secure entry in the tournament(s). Full payment will secure the team <u>starting position</u> in the order they are	
received. The half-payment option is available until May 1 st , 2010 and balances must be paid in full by this date. All	
entries received after May 1st, 2010 must be paid in full at time of	of entry.
All one-day tournaments are open to 75 teams. All two-day tourn Refund Policy:	naments are open to 150 teams.
Cancellations made more than 60 days prior to tournament will be	pe refunded in full. Cancellations less than 60 days prior
to tournament will be refunded in full only if your team can be rep	placed. If your team cannot be replaced and the
tournament has a full field, no refund will be given. Emergencies	
WMT Invitational Championship will be limited to 66 teams and will be held on September 25 & 26, 2010	
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One-Day Double Head	der Tournaments
Full / Half Payment	Full / Half Payment
☐ ☐ Pewaukee Lake	☐ ☐ Phillips Chain
Pewaukee, WI May 15 (Saturday)	Phillips, WI June 5 (Saturday)
☐ ☐ Lake Okauchee Okauchee, WI May 16 (Sunday)	☐ ☐ Butternut Lake Park Falls, WI June 6 (Sunday)
Lac Vieux Desert	Lake Mohawksin
Land O' Lakes, WI May 29 (Saturday)	Tomahawk, WI August 14 (Saturday)
□ □ North/South Twin Lakes	☐ ☐ Boom Lake
Phelps, WI May 31 (Monday)	Rhinelander, WI August 15 (Sunday)
Marion Open Championoring	WAINED.
MAJOR OPEN CHAMPIONSHIPS	WAIVER:
☐ ☐ Badgerland Open Championship	As a participant of the Wisconsin Muskie Tour, I enter
Three Lakes Chain June 19 & 20	and participate of my own free will and I am willing to
R.A.M.M. Cup Open Championship	sign this waiver as part of the participation of the tourna-
Manitowish Chain August 21-22	ment. That all liabilities of the director, promoter, judges,
☐ Autumn Classic Open Championship	agents and tournament sponsors are waived, with no
Eagle River Chain August 28 – 29	exceptions.
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	Partner One Signature
	Partier One Signature
	Partner Two Signature
Mail the completed form with shock (no each) included to	
Mail the completed form with check (no cash) included to: Wisconsin Muskie Tour	AMOUNT ENCLOSED:
14 E. Harvey St., Ste. A	ANIOGNI ENGLOGED.
Rhinelander, WI 54501	CHECK(S) NUMBER(S)
(715) 277-4411	
www.wmtseries.com/email - huntermd@newnorth.net	