



July 23-28, 2024

ENTRY FORM (Page 1)

Each tournament entry must be submitted by a current HBGFC member or a current member of a recognized fishing club based in the Gulf Coast. You can become a member of the HBGFC by completing your membership information on page three of the entry form.

Club Member's Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Fishing club you belong to: \_\_\_\_\_

<b>BOAT NAME</b>	Home Port:	<b>BOAT OWNERS INFORMATION</b> (If different from Club Member)	
Boat Social Media Handle(s):		Name:	
Make:	Year:	Address:	
Length:	Beam:	Draft:	City, State, Zip:
Please indicate whether or not you need a slip:			Telephone:
Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	(If yes, please select slip option on next page.)	Email:

Entry includes a custom Lone Star Shootout tournament gift package with six t-shirts and six caps/visors.

Please indicate quantities of desired six sizes below:

\_\_\_\_\_ Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ Extra Large \_\_\_\_\_ 2XL \_\_\_\_\_ 3XL

Entry includes a custom Lone Star Shootout boarding mat. If your entry is received by June 1, 2024, your boat name will be embroidered on your mat. Please indicate the color of boarding mat you prefer:

\_\_\_\_\_ Black \_\_\_\_\_ Navy \_\_\_\_\_ Tan

<b>BOAT CAPTAIN NAME</b>	<b>MATE NAME</b>
Address:	Address:
City, State, Zip:	City, State, Zip:
Telephone:	Telephone:
Email:	Email:

ENTRY OPTIONS (select one)		Cost Ea.	Cost
<input type="radio"/> OPTION #1: Entry Fee		\$4,000.00	_____
<input type="radio"/> OPTION #2: Corporate Sponsor Entry Fee	<ul style="list-style-type: none"> <li>• Display during tournament registration for marketing and networking opportunities</li> <li>• Company name and link on home page of tournament website year-round</li> <li>• Company name on all printed tournament materials including advertisements, programs and signage)</li> </ul>	\$4,500.00	_____
<b>ENTRY OPTIONS TOTAL:</b>			_____



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SLIP FEE:	Cost Ea.	Ext. Cost
<input type="radio"/> Boat length up to 59'	\$1,500.00	_____
<input type="radio"/> Boat lengths 60' - 81'	\$1,600.00	_____
<input type="radio"/> Boat lengths 82'+	\$2,200.00	_____
<b>SLIP FEE TOTAL:</b>		_____

EVENTS: Each tournament entry includes ticket packages for 6 people.	Cost Ea.	Qty.	Ext. Cost
<input type="radio"/> ADULT event ticket package (Wednesday and Saturday nights)	\$260.00		_____
<input type="radio"/> Wednesday ADULT event ticket	\$145.00		_____
<input type="radio"/> Saturday ADULT event ticket	\$175.00		_____
<input type="radio"/> Extra MINOR event ticket package (Wednesday and Saturday nights)	\$145.00		_____
<input type="radio"/> Wednesday MINOR event ticket	\$60.00		_____
<input type="radio"/> Saturday MINOR event ticket	\$90.00		_____
<b>EVENTS TOTAL:</b>			_____

MERCHANDISE: Reserve your extra tournament gear now!		Cost Ea.	Qty.	Ext. Cost
Short sleeve, poly tech tournament t-shirts. <i>Please indicate sizes and quantities:</i>	Small	\$40.00		_____
	Medium	\$40.00		_____
	Large	\$40.00		_____
	X-Large	\$40.00		_____
	2X	\$40.00		_____
	3X	\$40.00		_____
	Caps	\$25.00		_____
	Visors	\$25.00		_____
	<b>MERCHANDISE TOTAL:</b>			

SUBTOTAL	
Items	Cost
ENTRY	_____
SLIP FEE	_____
EVENTS	_____
MERCHANDISE	_____
<b>SUBTOTAL</b> (enter amount on page 3)	_____



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ENTRY FORM (Page 3)

**MEMBERSHIP:** Family memberships may consist of up to four (4) family members including dependent children.

						Cost Ea.	Qty.	Ext. Cost
<input type="radio"/> Grand Slam Lifetime Family Membership \$5,000.00	<input type="radio"/> Blue Marlin Elite Family Membership \$500.00	<input type="radio"/> White Marlin Family Membership \$250.00	<input type="radio"/> Spearfish Adult Membership \$150.00	<input type="radio"/> Sailfish Junior Membership \$50.00	<input type="radio"/> Sailfish Crew Membership (maximum 2 per boat) \$50.00	\$5,000.00		
						\$500.00		
						\$250.00		
						\$150.00		
						\$50.00		
						\$50.00		

MEMBER INFORMATION	MEMBER INFORMATION
Member Name: _____	Member Name: _____
Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Telephone: _____	Telephone: _____
Email: _____	Email: _____
T-shirt Size: _____	T-Shirt Size: _____

MEMBERSHIP INFORMATION	MEMBERSHIP INFORMATION
Member Name: _____	Member Name: _____
Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Telephone: _____	Telephone: _____
Email: _____	Email: _____
T-Shirt Size: _____	T-Shirt Size: _____

**CHARITABLE PROGRAMS:**

I would like to make a donation to HBGFC's Charitable Programs: \$ \_\_\_\_\_

**SUBTOTAL from Page 2:** \$ \_\_\_\_\_

**Membership Amount:** \$ \_\_\_\_\_

If payment is made with a credit card, there will be a 5% charge on the subtotal \$ \_\_\_\_\_

**TOTAL DUE:** \$ \_\_\_\_\_

Please select payment type:     Check     Credit Card

Credit Card #:

Name on Credit Card:

Exp Date:	CVV Code:	Billing Zip Code:
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Signature: