



July 22 - 27, 2025

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: _____

BOAT NAME	Home Port:	
Boat Social Media Handle(s):		
Make:	Year:	
Length:	Beam:	Draft:
Please indicate whether or not you need a slip:		
Yes: <input type="checkbox"/> No: <input type="checkbox"/> (If yes, please select slip option on next page.)		

BOAT OWNERS INFORMATION (If different from Club Member)
Name:
Address:
City, State, Zip:
Telephone:
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

BOAT CAPTAIN NAME	MATE NAME
Address:	Address:
City, State, Zip:	City, State, Zip:
Telephone:	Telephone:
Email:	Email:

ENTRY OPTIONS (select one)

☐ OPTION #1: Entry Fee

☐ OPTION #2: Corporate Sponsor Entry Fee

- Display during tournament registration for marketing and networking opportunities
- Company name and link on home page of tournament website year-round
- Company name on all printed tournament materials including advertisements, programs and signage)

Cost Ea.

Cost

\$4,000.00

\$4,500.00

ENTRY OPTIONS TOTAL:



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ENTRY FORM (Page 2)

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	
	SLIP FEE TOTAL:	
<hr/>		
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	
	EVENTS TOTAL:	
<hr/>		
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
	MERCHANDISE TOTAL:	

SUBTOTAL

Items

Cost

ENTRY

SLIP FEE

EVENTS

MERCHANDISE

SUBTOTAL

(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.								
<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	Cost Ea. \$5,000.00 \$500.00 \$250.00 \$150.00 \$50.00 \$50.00	Qty.	Ext. Cost
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: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card								
Credit Card #:								
Name on Credit Card:								
Exp Date:			CVV Code:			Billing Zip Code:		
Signature:								