

Lake Geneva
Williams Bay, WI

Lake Geneva
Williams Bay, WI



www.anglers-dream.com
P.O. Box 1201- Hammond, IN 46325
219-512-6581



Division 19
Director: Jim Oneil (708) 590-9706
***\$140 Entry Fee**
***Includes 1st & 2nd Big Bass**



Tournament of Champions
Mississippi River Pool 8 - Lacrosse Wisconsin
September 22 & 23

\$10,000

First Prize

***180% Payback**

***based on a 10 boat average and a 100 boat field**

5 Qualifying Events

May 21 - Williams Bay Ramp - Williams Bay, WI
June 11 - Williams Bay Ramp - Williams Bay, WI
July 9 - Williams Bay Ramp - Williams Bay, WI
July 23 - Williams Bay Ramp - Williams Bay, WI
August 13 - Williams Bay Ramp - Williams Bay, WI
September 22 & 23, 2017 - Tournament of Champions - Lacrosse, WI

Schedule of Events

ONE HOUR PRIOR TO TAKE OFF: Check in and Mandatory Registration at the Designated Site.

15 MINUTES PRIOR TO TAKE OFF: Mandatory Pre-Tournament Rules Meeting and Drawing for Starting Positions.

FIRST SAFE LIGHT: Ooze Off From the Official Check Point By Boat Position. Approximately 10 Second Intervals.

8 HOURS AFTER TAKE OFF: Check in at Official Designated Location.

(Time and Site May Vary Depending on Safe Conditions)

Pay Back Schedule - Qualifying Events (Based on a 30 Boat Field)

1st Place \$1025	2nd Place \$390
3rd Place \$260	4th Place \$220
5th Place \$195	6th Place \$165
7th Place \$150	8th Place \$145
9th Place \$120	
Big Bass \$300	2nd Big Bass \$150

Tournament of Champions Payback (Based on an average of 10 Boats per event & 100 Entries)

1st Place \$10,000	2nd Place \$3,500
3rd Place \$2,000	4th Place \$1,500
5th Place \$1,350	6th Place \$1,200
7th Place \$1,100	8th Place \$1,050
9th Place \$1,025	10th Place \$1,000
11th Place \$900	12th Place \$800
13th thru 14th \$700	15th thru 16th \$600
17 thru 20th Place \$500	

Anglers Dream Membership and Entry Form

Division Number _____ Team Number _____ Tournament Date ____/____/2017

MEMBER INFORMATION: Please Print

Member 1: _____

Address: _____

City: _____ State _____

Zip _____ Phone _____

E-mail: _____

Member _____ Substitute _____

Signature: _____

MEMBER INFORMATION:

Member 2: _____

Address: _____

City: _____ State _____

Zip _____ Phone _____

E-mail: _____

Member _____ Substitute _____

Youth: _____ Yes Youth Date of Birth: _____

Please Print

Liability Release

1. Having read the official rules and regulations and completed the above entry form, I/we agree to abide by all the conditions stated therein. We also agree to assume all applicable taxes.
 2. LIABILITY RELEASE: In signing this agreement, we hereby release Anglers Dream LLC., Their agents, employees and sponsors from any and all damages, claims, demands cost of expenses relating to injury of any property which we may sustain or which we may cause by reason of participating in or in connection with this tournament.
 3. VERIFICATION OF LIABILITY INSURANCE: We further state that we maintain current liability insurance on the boat we will use in this event.
 4. We signify by our signatures above that we have read the understood the agreements numbered 1, 2 and 3 above.
- A complete set of the rules may be obtained on the Anglers Dream Web Site (<http://www.anglers-dream.com>).

Payment Information

Membership Paid: Member 1: \$40 _____ Member 2: \$40 _____

Entry Fee: \$ 140. _____ Total Paid \$ _____

Send Pre-paid entries to: Anglers Dream LLC, PO Box 1201, Hammond, IN 46325
Pre-paid entries must be received a minimum of 7 days prior to the event.

Onsite entries are cash only.

Bass	Alive	Big Bass	Weight	Points

To be filled out by the Tournament Director