Should you need further information concerning the Tournament Schedule, please contact the

KY Youth Director Jason Elam @ 859-486-3340 email: Jason.elamkbf@gmail.com

KBF YOUTH Program

ALL TEAM MEMBERS MUST BE 8TH GRADE & UNDER

2024 MEMBERSHIP FORM

Mem 1 Name:			
Address:			
City:	St:	Zip Code:	
Cell #:			
Email Address:			
Date of Birth:			
Mem 2 Name:			
Address:			
City:			
Cell #:	·		
Email Address:			
Date of Birth:	Grade Y0	OU are in today:	
Boat Captain Name:			
Cell Phone #:			
-			Waiver by printing Names on top of st sign and date the Waiver at bottom of
KBF Junior events are TEAM e	vent ONLY. Membersh	nip Fees are \$25.00 pe	r member.
Fill out the Team Entry Form for	or 2 Team Members and	d the Boat Captain and	d return to:
Complete Team Entry form and a	attach Check in the amo	unt of \$50.00 : <u>Make c</u>	heck payable to <mark>TBF, Inc</mark> .
Mail Entry Form and Check to:	Donnie Keeton	212 Floyd Street	Carrollton, KY 41008
What Youth Club you prefer to jo	oin:		
KV Ir Bass-masters If di	fferent Club, name of Cl	ub	