

BOSS OF THE TOSS

CORNHOLE TOURNAMENT REGISTRATION FORM

WITH DOUBLE ELIMINATION

Name Player #1 _____ Name Player #2 _____

Team Name _____

Phone # _____ Email _____

Please email completed form to justin.comer12@yahoo.com. \$30 registration per team. For any other questions contact Justin Comer at 662-397-4458

Competition will be held in the Trustmark Parking Lot in Downtown Fulton
102 South Cummings Street
Fulton, MS 38843

Pay online or by check. Make checks payable to Itawamba County Development Council with Boss of the Toss in the Memo line.

I assume all risks and hazards of this tournament and release from responsibility any person or location involved with the tournament. In absence of signature, a payment of fee will constitute acceptance of the conditions set forth in this release. I grant full permission to use any photos, or other recordings for promotional purposes.

Sign _____ Date: _____