

# 2025 OFFICIAL REGISTRATION FORM

(Register on-line at: [www.muskyopen.com](http://www.muskyopen.com))

Please use separate registration form for each person

Make checks payable to: Eagle River Chamber of Commerce

Return to: Eagle River Area Chamber of Commerce & Visitors Center

P.O. Box 1917-MT, Eagle River, WI 54521

(PLEASE PRINT CLEARLY)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Please Check Here if New Address

Email \_\_\_\_\_

Lake Family:

1st Choice: \_\_\_\_\_

2nd Choice: \_\_\_\_\_

Husband/Wife

Spouse Name: \_\_\_\_\_

Youth Division (8-15 years of age)

\_\_\_\_\_  
(Parent/Guardian signature required)

T-Shirt Size:  S  M  L  XL  
 XXL  XXXL

List Your Fishing Partner(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ENTRY FEE MUST BE POSTMARKED  
BY AUGUST 1, 2025**

**\$75.00 per person**

Please make checks payable to:  
Eagle River Chamber of Commerce

**ON-SITE ENTRY FEE:**

**\$80.00 per person**

**(Only cash will be accepted at  
on-site registration)**

**NO ENTRIES**

**ACCEPTED AFTER AUGUST 1, 2025**

**All entries received by mail postmarked  
after August 1, 2025 will be returned.**

**Please register on-site at tournament  
headquarters.**

**OFFICE USE ONLY:**

Check # \_\_\_\_\_

Amt. Paid \_\_\_\_\_

Postmark Date \_\_\_\_\_

Lake \_\_\_\_\_

Assignment \_\_\_\_\_

**INSURANCE WAIVER MUST BE  
COMPLETED ALONG WITH  
REGISTRATION**

I am voluntarily participating in the 2025 National Championship Musky Open scheduled for August 15, 16 & 17, 2025.

I am aware that my participation in this tournament creates the risk of personal injury. My participation could also cause loss or damage to personal property.

I expressly agree to assume all risks of personal injury/loss to personal property or other tournament participants.

I hereby release and discharge the tournament sponsors/donors of the Eagle River Area Chamber of Commerce & Visitors Center and the Musky Clubs Alliance of Wisconsin, their officers, agents and employees and all volunteer workers from any injuries, damages or loss sustained, caused by negligence.

Any and all taxes are winner's responsibility.

I have read the release of liability participation agreement and understand all terms and conditions including the rules and regulations of the tournament.

Signed \_\_\_\_\_

Date \_\_\_\_\_

**EACH REGISTRANT MUST  
SIGN THEIR OWN FORM**

If you have any questions call the:  
**EAGLE RIVER AREA CHAMBER OF  
COMMERCE & VISITORS CENTER**  
715-479-6400 or 1-800-359-6315