

2025 OFFICIAL REGISTRATION FORM

(Register on-line at: 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**