



**4-H Sportfishing Tournament
2025 Entry Form
Tournament ends September 15Th**



Name_____ **Phone#**_____

Full Address_____

County/District_____ **Agent**_____

Agent Phone #_____

Agent Address_____

Specie/Category_____

Weight Digital Scale only_____

Length (mouth closed and tail pinched)_____

Location of Catch_____

Date Caught_____

Witnessed by_____

Signature of Angler_____

Attach picture and send to:

**Tommie Berger
406 S. New York Ave.
Sylvan Grove, KS 67481**

**bergkwf@wtciweb.com
785-524-6112 Phone or Text**