TROPHY FISH APPLICATION FORM FORM MUST BE FILLED OUT COMPLETELY. PLEASE PRINT. Phone number: () _____-Angler's name: City: State: Zip: Date of Birth : Do you qualify for a Master Angler Award? _____Yes ____No Fishing license number (TWRA #):

FISH INFORMATION:	KIND OF FISH (SPECIES):	DAT	E CAUGHT:		source
Body of water where caught:		Was	the fish released?	YesNo	Wildlife Re 729 N 37204
	Reservoir/LakeRiver/Stream	Bait		Artificial	essee Wil Sox 41729 wille. TN
County:	Length of fish (to nearest ¼ inch):	Leng	gth certification:	(A or B)	TARF Tenn P.O. F
A. Witness signature:		Phone number: ()		
Address:		City:	State:	Zip:	to eç
B. Photo: Print your name, birth date, and fish species on back of photo and enclose with application. Photos become property of TWRA and are not returned. Photos may be used in publications.					eck or mone 00 payable t nail to:
(Angler sign here) I,			hereby affirm that		a che or \$5.0 and m
the above information is true and in taking this fish I complied with all state fishing regulations and rules of the Tennessee Angler Recognition					er fc RA a
Program and that the witness actually witnessed the measuring of the fish and/or the photo is accurate and was not altered in any way.					Tvdr

Program and that the witness actually witnessed the measuring of the fish and/or the photo is accurate and was not altered in any way.

Address:

E-mail:



Agency