

**COUNTY OF PRINCE EDWARD  
SANDY RIVER RESERVOIR**

**APPLICATION FOR FISHING TOURNAMENT PERMIT**

Please complete the following information, sign and date the application and return it to the following address:

County of Prince Edward  
Post Office Box 382  
Farmville, Virginia 23901  
Telephone: (434) 392-8837  
Fax: (434) 392-6683

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Sponsoring Organization \_\_\_\_\_

Charitable Non-Profit or Civic Association? Yes \_\_\_\_\_ No \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Telephone: Day \_\_\_\_\_ Evening \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Requested Date For Tournament: 1st Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

Tournament Hours Start \_\_\_\_\_ End \_\_\_\_\_

Estimated Number of Participants \_\_\_\_\_

Entry Fee Charged to Participants \_\_\_\_\_

Proceeds from any fishing tournament held at the Sandy River Reservoir must go to benefit a charitable non-profit community organization or civic association. If different from above, please provide the name and contact information for the organization that will benefit from this tournament.

Organization \_\_\_\_\_

Contact \_\_\_\_\_

Telephone \_\_\_\_\_

I, the undersigned, acknowledge that I have been provided a copy of and have read the ***Ordinance to Regulate and Protect the Sandy River Reservoir***. Additionally, I agree to abide by all County and Commonwealth of Virginia laws, regulations and ordinances governing the use of the Sandy River Reservoir. I also understand that the Sandy River Reservoir will not be closed to public use during the tournament.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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Office Use Only

Date Received \_\_\_\_\_

Approved By \_\_\_\_\_

Date of Tournament \_\_\_\_\_

VDGIF Notified \_\_\_\_\_