



MEMBERSHIP APPLICATION Jan2010 FOR: NEW MEMBER RENEWAL
 Please complete this application, sign this form and return with your check made payable to:

MANGROVE COAST FLY FISHERS, P.O. BOX 3792, SARASOTA, FL 34230-3792

Payment received by: _____ Member of the Federation
 Cash Check Amount: \$ _____ Date: _____ of Fly Fishers # K 996000

NAME: _____

ADDRESS: _____ CITY: _____

STATE _____ ZIP _____ *E-MAIL: _____

*Email addresses will only be used for Club Business, and will not be provided to any 3rd parties, unless required by court order.

TELEPHONE: (work) _____ (home) _____

Current FFF membership number: FFF # _____

I AM MOST INTERESTED IN FISHING IN: SALTWATER FRESHWATER BOTH

MY LEVEL OF FLY FISHING IS: BEGINNER INTERMEDIATE EXPERIENCED ADVANCED

I AM WILLING TO: HELP IN MEETINGS BE A SPEAKER SHARE MY BOAT AT OUTINGS

BE ON A COMMITTEE SUCH AS: _____ Other committee interest? _____

TYPE OF MEMBERSHIP: ANNUAL DUES AND FOR RENEWAL, FROM FEBRUARY 1ST

Individual - \$30.00* Family - \$45.00* Business - \$175.00* (cash or gift certificates)

***Please Note: New members (1st year) are required to also join the Federation of Fly Fishers if not already an FFF member. Fees are paid to MCFF for the first year as follows: FFF annual dues: Individual \$35, Family \$45, Seniors \$25 (65 or older), Youth \$15 (under 18). In subsequent years FFF renewal dues will be billed directly by and paid directly to FFF. If already an FFF member, please add your FFF member number to this form above. Learn more at www.fedflyfishers.org**

I hereby, for myself, and on behalf of all minors listed below and anyone else claiming through me, release from liability the Club members, officers, directors, employees, trip coordinators, guides, agents, and the like, and also waive any right to sue and/or recover damages from the Club, its members, officers, directors, employees, trip coordinators, guides, agents, and the like, for any illness or injury, loss of life, and any damage or loss of personal property which may arise out of participation in the Club's activities. The waiver applies to any negligent act or omission as well as to any attempts at rescue or other intentional acts intended to promote my safety or well being or associated with the activities.

PARENTS OF MINORS: I give permission for my son(s)/daughter(s) to participate in the activities of the Club and intend that the waiver and release expressed above apply with respect to the below named minor(s)

Minors' NAME & date of birth: _____

Signature: _____ Date _____