FREE STATE FLY FISHERS, INC.

Membership Application

Name: _____ _____
(First) (Last)

Address: _____

City: _____ State: _____

Zip code: _____

Phone: _____

Email: _____

If renewal → Is this a new address, phone number or email address? ___ Yes ___ No

Type of Membership:

_____ Regular $15.00 per year
_____ Senior (55 or older) $10.00 per year
_____ Junior (16 or younger) $10.00 per year

Payment Method: Cash _____ Check _____

Make checks payable to: FREE STATE FLY FISHERS, INC.

Renewal _____ New Member _____

May we share your contact information with other club members? ____Yes _____No

Send Application and Payment to:

Frank Bowne
3523 Tallyho Ct.
Davidsonville, MD 21035-2436