## MEMBERSHIP APPLICATION

Name								Add	ress									
City					State			Zip	Code			E-mai	1					
Phon If appl	e lying for a CF	Home #	LY MEM	/BERSHI	P, pleas	e inclu	Worlde name		ages of	famil	ly memb	ers:	Ce	ell#				
	Spouse																	
	Name					Ag	e		Nar	ne						Age		
	Name					Ag	ge		Nar	ne [						Age		
* NE	W MEMBE	RS are as	ked for	a \$10 do	nation 1	to cove	er the c	cost of	Badge	e, Log	go Patcl	n, and N	lew N	/Jemb	er Pack	et.		
The following Types of CFFU Annual Memberships are available: Dues are prorated after September 1 through December 31  Individual, Member, \$40.00 * Family, Member, \$55.00 * Junior, Member, \$25.00 * (Under 18) or Life, Member, \$400.00 *																		
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I, (Name)  I, (Name)  In am eighteen years of age or older. CFFU sponsors events such as fishing outings, meetings, work parties for conservation and related projects ("events"). I may attend/or participate in events, either alone or with family members, or with guests, all of whom have signed this Release and Waiver of Liability.  I have been informed that there are significant risks of personal injury or death to me and those in my company, and property damage associated with the events and the sport of fly-fishing. I am fully aware of the nature and scope of the risk associated with fishing, and have ample opportunity to ask all questions that I deem important to my decision to execute this Release and attend an event.  [WHERE APPLICABLE] I am the parent and/or guardian of minors who are in my company, to whom I have agreed to assume full responsibility for their conduct and safety:  With full and complete knowledge of the nature and scope of the associated risks, on behalf of myself, my heirs, executors, administrators and assigns, I hereby voluntarily release, discharge, waive and relinquish any and all actions, claims or causes of action for personal injury, death, property damage or other liability of any sort or nature against CFFU, or any of its officers, directors, or members, which may have occurred or may occur during an event. I agree that under no circumstances will I or my heirs, executors, administrators and/or assigns prosecute any claim or action against CFFU, or any of its officers, directors, or members relating to any personal injury, death, or property damage I suffer or incur during an event. I acknowledge and EXPRESSLY ASSUME ALL RISK associated with aspects of an event, and fully understand that the potential exists for serious personal injury, death, and/or property damage. I accept all risk associated with the event with full knowledge of that potential.  With knowledge of all of these risks, I further agree to HOLD HARMLESS, CFFU, and all of its officers, directors and members from a																		
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	Agree	Name									e/Time							
My Fly I	Fishing Leve	l is:					Please	e print	this fo	orm a	nd brine	g to a m	eetin	g alon	ng with	your pa	yment.	