|  |
| --- |
| Central Ohio Fly FishersMembership Application FormSeptember 2023 - September 2024 |
| **Name:**  |
| **Address (list only one):** |
| **City:** | **State:** | **Zip:** |
| **Phone Number (list only one):** |
| **Email address (list only one):** |
| **Signature:**  | **Date:** |
| By signing above, you agree to abide by all the rules and regulations set forth in the Central Ohio Fly Fishers Code of Regulations published on http://www.centralohioflyfishers.org/coffregulations.html. Any breach of these regulations or behavior unbecoming of a fly fisher may result in the termination of your membership. All information will remain confidential and will only be available to COFF members.  |
| Are you willing to give a presentation on your fly-fishing experience?Do you have any ideas for presentations that you would like to hear?  |
| Are you willing to volunteer in some way to help out the club? |

Please complete the attached membership form and remit with $30 annual dues (checks only, made payable to COFF) to: **Central Ohio Fly Fishers, 850 Twin Rivers Dr., #16381, Columbus, Ohio 43216**

V. 07/23/2023