



Member of
Federation of
Fly Fishers

Membership Application

Check One: New Member Renewal Application Today's Date: _____

Name: _____

Address: _____

City, State, Zip: _____

Birthday (month/day): _____

How can we reach you? _____

Home Phone	Preferred Email	Cell Phone (optional)
Work Phone (optional)	Other Email (optional)	
Other (Cell phone, etc.) _____		

Fly Fishing Experience: Beginner Novice Experienced

I am interested in: Casting Fly Tying Conservation Projects

I would like to participate in the following areas:

Outings Website Advertising Membership

Conservation Meeting Programs Sponsorships Other: _____

I am currently a member of: Federation of Fly Fishers (FFF)

Federation of Fly Fishers (Through GWFF)

Trout Unlimited

Atlanta Fly Fishing Club (AFFC)

Other:

First Year Membership and Federation Fly Fisher Dues\$55.00	Annual Single Membership Renewal..... \$20.00
First Year Family Membership and FFF Dues.....\$75.00	Annual Family Membership Renewal.....\$30.00

If you join GWFF in Oct, Nov or Dec you must pay the full \$35 FFF fee and may pay 1/2 of the Annual membership. Oct/Nov/Dec = \$45 Single, \$60 Family

Make Checks Payable to: Georgia Women FlyFishers
C/O Beth Tuttle, 7 Regal Way, Lawrenceville, GA 30044

Note: To become a member of Georgia Women's FlyFishers, you MUST also join Federation of Fly Fishers if you are not currently an FFF member.

Please read, sign and include the GWFF Waiver Agreement with the Membership Application.



Georgia Women Flyfishers Waiver Agreement

PLEASE READ CAREFULLY – THIS IS A WAIVER AND RELEASE OF LIABILITY

I, the undersigned, hereby acknowledge that I fully understand and accept that there are certain hazards and elements of danger inherent in many if not all activities which are beyond the control of the members, officers, directors, outings coordinators, guides and agents of Georgia Women Flyfishers. I realize that my participation in these activities may result in personal illness or injury, due to accidents, the forces of nature, or other causes not foreseeable. Such illness and injury may include disease, strains, sprains, fractures, dislocations, paralysis, and/or death. Possible injuries may cause serious and permanent disability. I also realize that my participation in the various activities may result in the loss of or damage to personal property.

Now therefore, intending to be legally bound, I hereby waive, for myself and anyone else claiming through me, my right to sue or recover damages from Georgia Women Flyfishers, their members, officers, directors, guides and agents for any illness or injury to my person, loss of life, and any damage or loss of property which may arise out of my participation in Georgia Women Flyfishers activities. The waiver applies to any negligent act or omission and to any intentional act intended to promote my safety or well-being.

I understand that Georgia Women Flyfishers sponsor "cooperative adventures," where the group is collectively responsible for the conduct of the activities. Further, I understand that no one but myself is responsible for judging my qualifications or for my safety when I choose to participate in any activity.

I have received, read, understand, and accept the contents of this agreement. I further state that I am legally competent to sign this waiver and release of liability; and that I understand that the terms herein are contractual and a mere recital. I have read this waiver before signing it, and I have signed it voluntarily. This waiver has no expiration date.

Date

Printed Name

Signature