

“Salty” Flyrodders of New York

MEMBERSHIP APPLICATION / RENEWAL AND RELEASE

The undersigned hereby applies for membership or renewal, and as a condition of participating in the activities of the **Salty Flyrodders of NY, Inc. (“SALTY FLYRODDERS”)**, acknowledges that I understand the inherent risk in participating in the activities of **SALTY FLYRODDERS**, including boat and kayak fishing trips, which **SALTY FLYRODDERS** may make available to members.

I understand that **SALTY FLYRODDERS** activities may take me into remote areas, and that I may not be able to be promptly evacuated or receive proper medical care in the event of injury or disease. I further understand that I am solely responsible for all costs of medical treatment and transportation.

I represent that I have the knowledge, experience, and skill to kayak and fish in any sea or water condition and weather in which I choose to participate. I acknowledge that I am solely responsible for my decision to participate.

Intending to be legally bound, for myself, my heirs, executors, and administrators, except to the extent that indemnity insurance is available, I waive, release, indemnify, and hold harmless, **SALTY FLYRODDERS**, its Officers, Board of Directors, and members, against any and all claims for personal injury, disease, death, and property damage or loss, that I may incur, arising out of or connected in any way with any and all **SALTY FLYRODDERS** activities. I assume the risk of undertaking all **SALTY FLYRODDERS** activities, including related travel.

Where membership or participation includes Spouse/SO or Children, I shall indemnify and hold harmless the **SALTY FLYRODDERS**, its Officers, Board of Directors, and members, against any and all claims of family members.

Date: ___ / ___ 20 ___ **MEMBER**

THE AUTHORIZATION OF PAYMENT OF DUES ON-LINE CONSTITUTES ACCEPTANCE OF THE TERMS OF MEMBERSHIP AND PARTICIPATION AS IF THE MEMBER OR PARTICIPANT, AND PARTICIPATING FAMILY MEMBERS SIGNED THIS FORM.

Sign Name: _____
 Print Name: _____
 Address: _____
 City, St, Zip: _____
 Home Phone: _____
 Cell Phone: _____
 email address: _____
 Spouse/SO: _____
 Children: _____

In case of emergency, when reasonably feasible, contact:

Name: _____ Relationship: _____

Cell () _____ Home () _____ Office () _____

DUES: check as applicable

Individual	\$40.00 []	Seniors (over 65)	\$20.00 []	•
Husband and Wife/SO*	\$60.00 []	Youth 16-21/Student	\$20.00 []	
Children under 16 yrs	\$5.00 []	New Member App Fee	\$10.00 []	

Payable **Flyrodders of New York**, mail to **345 E. 57th St. 2C, NY, NY 10022** to **Salty**

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ADDITIONAL INFORMATION:

Answering or not answering, or how you answer has NO bearing on your eligibility.

- The Club places no restriction on its membership other than a boundless enthusiasm for the fly rod, its literature and traditions and a willingness to participate in the free and unhampered exchange of saltwater fly fishing information among its members.
- The following answers gives the Board information about the makeup of the membership.
- Knowing your expectations helps us to create the programs.

Print Name: _____

Occupation: _____ Age: _____

Do you use a fly rod now? YES NO

How many years: fly fishing: _____ How many years salt-water fly fishing: _____

Where do you fish regularly?

If you own a boat, Describe: Length: _____ Make: _____ Model: _____

Do you kayak-fish? YES NO If you own a kayak, Make/Model _____

You will be assigned to a committee. In which one(s) would you like to help?

- | | |
|---|---|
| <input type="checkbox"/> CASTING | <input type="checkbox"/> HOSPITALITY |
| <input type="checkbox"/> CONCLAVE | <input type="checkbox"/> MEMBERSHIP |
| <input type="checkbox"/> CONSERVATION | <input type="checkbox"/> PROGRAM |
| <input type="checkbox"/> "DOUBLE HAUL" NEWSLETTER | <input type="checkbox"/> PUBLIC RELATIONS |
| <input type="checkbox"/> FISHING OUTINGS | <input type="checkbox"/> SHOWS & EVENTS |
| <input type="checkbox"/> FLY TYING | <input type="checkbox"/> WEB SITE |

What would you like to learn from meetings, guests, special events, etc?

Comments and/or suggestions:

PLEASE HAVE EACH MEMBER AND FAMILY MEMBER SIGN, AND MAIL WITH THE APPROPRIATE CHECK PAYABLE TO:

“Salty” Flyrodders of New York
345 E 57th St Suite 2C, New York NY 10022-3356