

FOX VALLEY AREA ANGLERS

New Membership or Renewal Application

Renewal needs only complete name and any changes to your profile

Name: _____Spouse Name: _____

Address:	City:	State:	Zip Code:	
Home Phone:	Cell Phone:			
eMail:				
Boat Owner: (Circle One	_			
<mark>(Boat Owners mu</mark>	<mark>ist include proof of \$3</mark>	<mark>300,000 minimum</mark>	liability insurance.)	
Make and Model:			_	
Length:	Color:		Engine HP:	
claim or demands therefore on act to the event(s) sponsored by the F 2. Hereby agrees to indemnify and sincur arising out of or related to the second of th	count of injury to the person fox Valley Area Anglers fishing ave and hold harmless the relate event(s) whether caused by your or any risk of bodily injury sees or otherwise. It is the event(s) are dark, also expressly acknowledge easees. It was a waiver of liability, assumpt to broad and inclusive as is per thereof is held invalid, it is a provide to the Fox Valley Area a will not be sold or rented to a fity, assumption of risk and inconditional release of all liables.	or property or resulting ng club, whether caused leasees and each of then by the negligence of the ray, death or property damagerous and involve the east the injuries received ray ion of risk and indemnity mitted by the laws of the greed that the balance slanglers including your ray third parties. demnity agreement, fully lifty without any inducembility to the greatest external caused.	age arising out of or related to the entitle of serious injury and/or death a may be compounded or increased by a greement extends to all acts of reprovince or State in which the evolutional, notwithstanding continue in full arme, address, phone number and entitle of understand its terms, understand the ent, assurance or guarantee being in the allowed by law.	out of or related or otherwise. or cost they may event(s) whether and/or property y negligent rescue negligence by the ent(s) is/are II legal force and mail address are that I have given nade to me and
Signature:		Date:		
Signature of Guardian if under 18:		Dat	e:	
The \$35.00 Membership Fees may be			ay print your completed form of Box 24 Wasco, IL 60183-0024	
		ine Received E		