



2022-2023 STUDENT ANGLER MEMBERSHIP APPLICATION

\$25 NATIONAL MEMBERSHIP FEE

PAYABLE TO: SC HIGH SCHOOL BASS CHALLENGE

SCHOOL / TEAM NAME _____

STUDENT Full Name _____

Mailing Address _____

City _____ State _____ Zip _____

Birthday _____ Age NOW _____

Email Address _____

Home Phone _____ PARENT Cell Phone _____

STUDENT Cell Phone _____

Last Grade Completed _____ Grade in NOW _____

Do you have any physical impairment? Yes ___ No ___

If yes, please explain below:

Student Signature _____

Guardian Signature _____

Angler TBF/SAF Membership# _____

(Leave blank if unknown)