



## Membership Application / Renewal

Annual Membership: \$25

### MEMBER INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Email: \_\_\_\_\_

(Note: Club Newsletter distributed via E-mail only)

\* **NEW MEMBERS:** Dues are prorated to \$12 for first year if joining after June

**Family Members:** (Family members participating under your membership should be listed below)

1. \_\_\_\_\_ 3. \_\_\_\_\_

2. \_\_\_\_\_ 4. \_\_\_\_\_

- ☐ Project Healing Waters/Lifetime Members, 65 yrs old and member for 10+ years, (dues are voluntary), must still fill out name and sign waiver form
- ☐ I'm new to fly fishing and would like help in learning to fly fish
- ☐ I would like to volunteer to help with Board Duties/Assist in community service projects

### ***Waiver form for club activities (must sign each year to participate in club activities)***

**Acknowledgement and Release:** I recognize that there are inherent risks associated with the activities in which I may participate with Pikes Peak Flyfishers (hereafter referred to as "the club"). Such activities include but are not limited to fishing, camping, boating, hiking, picnicking, club meetings, social, volunteer and cultural events and transportation or carpools arranged among members through the club. I understand that I am fully capable of evaluating such risks and agree that it is appropriate that I assume all of such risks for myself.

Accordingly, I hereby release, acquit, and fully discharge the club, its board of directors, officers, leaders, members, and all other persons who provide their services to the club from any and all claims and liabilities for losses, damages, or injuries that I may suffer in the course of, or resulting from, my participation in any club activities, even if such claims or liabilities may arise out of the negligence or other fault of any of the above-named persons. This release and discharge shall be binding upon myself, my heirs, and my personal representatives.

Members bringing guests to club functions will ensure that guests sign this release a copy of which can be found on the web site or obtained from the club activity sponsor. Return signed release to any membership club officer.

### **AGREED and ACKNOWLEDGED:**

Signature \_\_\_\_\_ Print Name Clearly \_\_\_\_\_

Date: \_\_\_\_\_

### **Mail or Email To:**

EMAIL: [kuduhunterkudu@gmail.com](mailto:kuduhunterkudu@gmail.com) Make Checks Payable to: PIKES PEAK FLY FISHERS  
Send payment to: Pikes Peak Flyfishers, PO Box 26600, Colorado Springs, CO 80936