**Membership Application**



**Overlake Fly Fishing Club 2017**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Aims and Objectives***

To promote, encourage and work towards:

1. Improvement and perpetuation of fly fishing water.

2. Wise management of fish species angled for by fly fishing techniques.

3. Conservation of natural resources and environment.

4. Improvement in the state of the art of fly fishing.

5. High standards for Club membership.

6. Individuals of all ages to become fly fishers.

7. Understanding landowners’ rights relative to access to fishing water.

**As a member, I will accept the aims and objectives of the Overlake Fly Fishing Club.**

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

***(Please print legibly)***

Other Name(s) and Relationship(s) to You (Family Membership): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

Home Phone: (\_\_\_\_) - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_\_) - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Non-member Spouse (optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Membership Fee Schedule*** New New Renew Renew

(Circle applicable membership type) Associate Individual Family Individual Family

Initiation (new members only) N/A $ 10 $ 15 N/A N/A

Annual Dues\* $ 15 $ 65 $ 70 $65 $70

**Total $ 15 $ 75 $ 85 $65 $70**

***Life $1,000 Lifetime Dues***

*\* After July 1st new members pay half the Annual Dues plus the full Initiation fee; after Nov. 1 new Individual members pay $12 for Annual Dues plus Initiation fee and new Family members pay $14 for Annual Due plus Initiation fee.*

Amount Paid: \_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_ Cash Check Check Number\_\_\_\_\_\_\_\_\_\_

***Committee Preference***

Active participation is expected of **all members**. Not only is this a great way to meet other Club members, but it is a great way to learn more about the sport of fly fishing! ***Please check areas of interest for 2016.***

 Auction Outings Holiday Party

 Membership Program Conservation Picnic Windknots

 Treasurer Raffle Education Library Website

***International Federation of Flyfishers*** Are you also a member of the IFFF? Yes No

Make checks payable to **OVERLAKE FLY FISHING CLUB (OFFC)**

**Mail** your check to the OFFC Treasurer: ***Ray Kanemori, 9733 112th Ave NE, Kirkland, WA 98033***

# http://www.offc.org/images/overlakelogo4.jpgWAIVER, RELEASE OF LIABILITY http://www.offc.org/images/overlakelogo4.jpg

# AND ASSUMPTION OF RISK

**~ 2017 ~**

## ***TO BE SIGNED BY NEW AND RETURNING MEMBERS***

In consideration of my participation in activities arranged for me by OVERLAKE FLY FISHING CLUB I hereby release and covenant not to sue OVERLAKE FLY FISHING CLUB, INC., its owners, shareholders, directors, officers, employees, representatives, agents, and lessees from any and all present and future claims resulting from ordinary negligence, the inherent risk of my participation in any activities or arrangements and the use of the facilities and equipment of OVERLAKE FLY FISHING CLUB, INC., including but not limited to any loss, injury, damage, or liability sustained by me while on or about the premises of the club.

I am fully aware and understand that OVERLAKE FLY FISHING CLUB, INC. does not have on or about the premises, or employ or contract with any medical services for, provisions for ordinary or emergency medical services including but not limited to emergency cardiovascular assistance.

I agree that immediately prior to participation in any activity arranged for me by OVERLAKE FLY FISHING CLUB I will inspect the facilities and equipment to be used and if any defect is apparent I will not use the facility or equipment and I will notify the management of OVERLAKE FLY FISHING CLUB, INC. of the defect.

I further agree that if I am not knowledgeable in the proper use of any of OVERLAKE FLY FISHING CLUB, INC. facilities or equipment, I will obtain proper instruction for the correct use of such facility or equipment from a qualified individual before I will use the facility or equipment.

I assume all the foregoing risks and accept personal responsibility for any damages and loss of property, injury, permanent disability, or death resulting therefrom. I acknowledge and agree that if I bring a dog or other pet to any club activity, I do so fully at my own risk, and that the OVERLAKE FLY FISHING CLUB, INC. is not responsible for any loss, injury, damage, or liability caused by or to such pet.

**I HAVE READ AND FULLY UNDERSTAND THE ABOVE WAIVER, RELEASE AND ASSUMPTION OF RISK AND FULLY UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING THIS WAIVER, RELEASE AND ASSUMPTION OF RISK AND SIGN IT VOLUNTARILY.**

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_

(For Family Membership)

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_

Any person under the age of 18 years must have a parent or guardian co-sign this form.

**For New Members Only**

**Date(s) attended OFFC Meeting(s)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sponsor (if any):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If you do not have a sponsor, do you wish to have a member assigned to be your sponsor/mentor to assist you in getting involved? Yes No

**1. Reason(s) for joining OFFC:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Biographical Information:** How long in this area? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous location, if applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment: Self\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Family Member(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of business: Self \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Family Member(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Fishing Experience:** How did you get started fishing? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Family Member(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you been fly fishing? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Family Member(s)?\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a favorite fishing area? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you prefer: Saltwater? \_\_\_\_ Lakes? \_\_\_\_\_ Streams? \_\_\_\_\_\_

In what areas can the club help you in furthering your knowledge and enjoyment of fly fishing?

 Fly Casting Fly Tying Where to Fish Other (Specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Club Activities:** Have you or other Family Member(s) participated in other fly fishing organizations or notable activities? (Please describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any special experience or interest that you believe can benefit OFFC? \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any objection to your personal contact information being disseminated to other club members via the Membership Directory club roster updates? No Yes

**Please return the completed application and waiver form to Bill Courshon, Vice President – Membership at a club meeting or by mailing to the following address:**

***Ray Kanemori, Treasurer***

***Overlake Fly Fishing Club***

***9733 112th Ave NE***

***Kirkland, WA 98033***

**For additional membership information, contact Bill Courshon at 425-644-2164 or email any questions to *membership@offc.org***

**For Returning Members Only**

**1. Membership:** How long have you been a member of OFFC? \_\_\_\_\_\_\_\_\_ Year Joined? \_\_\_\_\_\_\_

**2. Fishing Experience:** How long have you been fly fishing? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a favorite fishing area(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you prefer: Saltwater? \_\_\_\_ Lakes? \_\_\_\_\_ Streams? \_\_\_\_\_\_

Do you possess any experience or expertise in fly fishing and/or related areas that you would agree to share as a mentor to other club members on a formal or informal basis? (Specify, e.g., fly tying, rod building, lake fishing, sea-run cutthroat fishing on Puget Sound, steelhead fishing, fishing on Snoqualmie River, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Would you agree to our disclosing this information on the club roster so that newer or other members may contact you for information or advice if needed? Yes No

Do you have any objection to your personal contact information being disseminated to other club members via the Membership Directory or club roster updates? No Yes

**3. Sponsor/Mentor:** Would you agree to be assigned to act as a Sponsor/Mentor for new members who do not have one or who otherwise need assistance in getting involved in the club and/or fly fishing in general? Yes No

**Please return the completed application and waiver form to Bill Courshon, Vice President – Membership at a club meeting or by mailing to the following address:**

***Ray Kanemori, Treasurer***

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***9733 112th Ave NE***

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