



Red River Fly Fishers Membership Application



Date: _____

First Name: _____ Last Name: _____

Spouse: _____

Address: _____ Apt # _____

City: _____ State: _____ Zip: _____

Phone: _____

EMAIL: _____

When is the best time to contact you? _____

Are You a Renewing Member? Yes ____ No ____

Are you New to Fly Fishing? Yes ____ No ____

Are you wanting to experience Fly Tying? Yes ____ No ____

Are you a Member of Fly Fishers International (FFI) Yes ____ No ____

Membership check all that apply

1. Single Adult Yearly \$25 ____
2. Family \$35 ____
3. Youth/Student \$10 ____
(under 18)

**Please Mail Payment to: Make checks payable to Red River Fly Fishers
Send to or pay at a meeting.**

**P.O. Box 1931
Sherman, Texas, 75091**