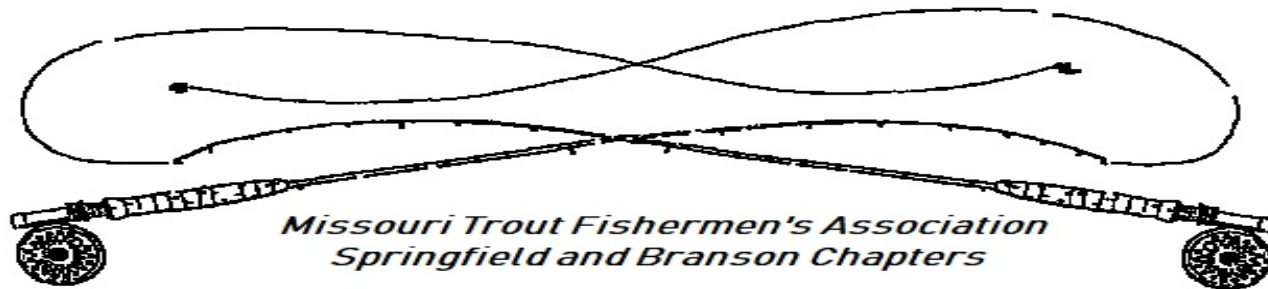


# 2019 MEMBERSHIP APPLICATION



I have an interest to improve the grand sport of Trout and Game fishing in Missouri and desire to give support to activities directed towards this end.

Date \_\_\_\_\_ Make Check Payable to: **MTFA-Springfield** or **MTFA-Branson**  
**Circle either Springfield or Branson. Use separate forms to join both.**

For Springfield Chapter mail to:  
Bob Randall  
2239 W. Buena Vista St.  
Springfield, MO 65810

For Branson Chapter mail to:  
Howard Hawkins  
198 Groton  
Hollister, MO 65672

Your Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home or cell Telephone: \_\_\_\_\_  
e-mail: \_\_\_\_\_

If applying for family membership, please list names spouse and children age 16 and under who should receive membership.

Spouse:  
(1) \_\_\_\_\_  
(2) \_\_\_\_\_  
(3) \_\_\_\_\_

## **Please circle or list a response to the following questions:**

Are you an individual member of FFI paying dues directly to this organization?... Yes or No  
Are you an individual member of CFM paying dues directly to this organization?... Yes or No  
Name a topic or program of interest. \_\_\_\_\_  
What would you like more from the club? \_\_\_\_\_  
Newsletter preference: electronic e-mail? \_\_\_\_\_ or hard copy by U. S. mail \_\_\_\_\_

## **ANNUAL MEMBERSHIP DUES**

Family .....\$15.00 Individual .....\$15.00 Contributing .....\$25.00  
Missouri Trout Fishermen's Association - Springfield or Branson Chapter dues  
through calendar year 2019

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Use the following if receipt is needed for cash payment:

Received 2019 MTFA dues payment of \$ \_\_\_\_\_ from: \_\_\_\_\_  
this date \_\_\_\_\_.  
Signature of Treasurer or Membership Chairperson \_\_\_\_\_