**2021 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.

Make Check Payable to: MTFA-Springfield

Dues are not deductible for income tax purposes

Mail to:

Bob Randall

2239 W. Buena Vista St.

Springfield, MO 65810

Date\_\_\_\_\_\_\_\_\_\_\_\_

Your Name:

Address:

City: State: Zip Code:

Home or cell Telephone:

e-mail address:

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 FFF 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 through calendar year 2021

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Use the following if receipt is needed for cash payment:

Received 2021 MTFA dues payment of $\_\_\_\_\_\_\_\_\_\_\_from:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ this date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Signature of Treasurer or Membership Chairperson\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_