

2024 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

Dues are not de	ductible for inco	ome tax purposes
Mail to:		• •
Dennis Stead		
4027 South Kentwood		
Springfield, MO 65804		
Date		
Your Name:		
Address:		
City:	State:	Zip Code:
Home or cell Telephone:	State.	Zip Code.
e-mail address:		
e-man address.		
If applying for family membership, please list na membership.	mes spouse and chil	dren age 16 and under who should receive
Spouse:		
(1)		
(2)		
(3)		
Please circle or list a response to the	he following q	uestions:
Are you an individual member of CFM p	paying dues dire	ctly to this organization? Yes or No
Name a topic or program of interest.		
What would you like more from the club	b?	
Newsletter preference: electronic e-mai	il? or har	rd copy by U. S. mail
ANNUAL MEMBERSHIP DUI	<u>ES</u>	
Missouri Trout Fishermen's Ass	sociation - Spring	o Contributing\$25.00 field through calendar year 2024
Use the following if receipt is needed fo		
Received 2024 MTFA dues payment of \$	from:	this date
Signature of Treasurer or Membership Chairperson_		