



***Application for
CLUB MEMBERSHIP OR
RENEWAL OF CLUB MEMBERSHIP
IN THE
B.C. FEDERATION OF FLYFISHERS***

Club Name _____
Number of members _____ Is the club incorporated as a society _____
Mailing Address _____

Presidents Name _____
Phone _____ Fax _____ e-mail _____

BCFFF Delegate name (if not the President) _____
Phone _____ Fax _____ e-mail _____

Newsletter Editors Name _____
Phone: _____ Fax _____ email: _____

The above Club hereby agrees to abide by the terms and the spirit of the
BCFFF Constitution & Bylaws
Signed _____ Title _____

Please mail to:
B.C.F.F.F. – Membership Director
P.O. Box 2442 Stn. Main
349 Georgia Street West
Vancouver, B.C. V6B 3W7

A cheque should accompany this Application for membership dues
calculated as follows:
Club \$15.00, plus a membership per capita fee of \$10 per member (this
includes the \$5.00 cost of liability insurance.
Cheque Enclosed: \$ _____

Please include an up to date membership list for your club.
Thank you for your interest in the B.C. Federation of Fly Fishers.