



US Youth Fly Fishing Team



Application for the US Youth National Fly Fishing Team Clinic April 4-6, 2014 Nantahala Outdoor Center, North Carolina

Print Name: _____ Date of Birth _____ M/F _____

Address: _____

City _____ State _____ Zip _____

Phone(H) _____ Phone(C) _____

E-Mail _____ Parent's E-mail _____

Participant Signature _____ Date _____

Parent or Guardian Signature _____ Date _____

(Required if Participant is under 18 years of age)

Please provide the following with this application:

- Signed copy of this application, as well as the Statement of Responsibility and the Code of Conduct (Both available on the Team website and by request from Team Manager, Rich Reedinger or Team Secretary, Deb Ridgeway)
- A list of any limiting medical conditions, allergies, and/or dietary conditions
- Payment of \$150.00, made payable to The US Youth Fly Fishing Team, Inc.

Mail all forms (Application, Statement of Responsibility, Code of Conduct and Payment) to:

**Rich Reedinger, Team Manager
12488 Kenwood Drive
Petersburg, PA 16669**

Deadline for submission of application and payment is March 1, 2014

The USYFFT, Inc., is a 501 (c)(3) non-profit, Federal I.D. 26-1759674
Form revised 12/22/2013